

PREA Facility Audit Report: Final

Name of Facility: Central Regional Jail and Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/14/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Mable P. Wheeler	Date of Signature: 12/14/ 2023

AUDITOR INFORMATION	
Auditor name:	Wheeler, Mable
Email:	wheeler5p@hotmail.com
Start Date of On-Site Audit:	08/20/2023
End Date of On-Site Audit:	08/23/2023

FACILITY INFORMATION	
Facility name:	Central Regional Jail and Correctional Facility
Facility physical address:	1255 Dyer Hill Road, Sutton, West Virginia - 26601
Facility mailing address:	1409 Greenbrier Street, Charleston, West Virginia - 25311

Primary Contact	
Name:	Amanda McGrew
Email Address:	amanda.d.mcgreww@wv.gov
Telephone Number:	3045506713

Warden/Jail Administrator/Sheriff/Director	
Name:	Harvey Hawkins
Email Address:	Harvey.M.Hawkins@wv.Gov
Telephone Number:	304-765-7904

Facility PREA Compliance Manager

Facility Health Service Administrator On-site	
Name:	Lara Lynn
Email Address:	Llynn@Wexford.com
Telephone Number:	304-765-7904

Facility Characteristics	
Designed facility capacity:	320
Current population of facility:	352
Average daily population for the past 12 months:	365
Has the facility been over capacity at any point in the past 12 months?	Yes
Which population(s) does the facility hold?	Both females and males
Age range of population:	18-71
Facility security levels/inmate custody levels:	Min-Max

Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	75
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	22
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	1

AGENCY INFORMATION

Name of agency:	West Virginia Division of Corrections and Rehabilitation
Governing authority or parent agency (if applicable):	WV Department of Homeland Security
Physical Address:	1409 Greenbrier Street, Charleston, West Virginia - 25311
Mailing Address:	WV Division of Corrections & Rehabilitation, 1409 Greenbrier St., Charleston, West Virginia - 25311
Telephone number:	3045582036

Agency Chief Executive Officer Information:

Name:	William K Marshall III
Email Address:	William.K.Marshall@wv.gov
Telephone Number:	304-558-2036

Agency-Wide PREA Coordinator Information

Name:	Tim Harper	Email Address:	Timothy.V.Harper@wv.gov
--------------	------------	-----------------------	-------------------------

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-08-20
2. End date of the onsite portion of the audit:	2023-08-23

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International (No information received) WVFRIS (Advocate)

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	320
15. Average daily population for the past 12 months:	365
16. Number of inmate/resident/detainee housing units:	16
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	347
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	1

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The facility provided the auditor with a roster of all confined persons as of the first day of the onsite portion of the audit. Individuals identified as part of the targeted population were identified. The auditor had no issues identifying population's characteristics.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>75</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>1</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>22</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>The auditor selected confined persons by age, race, ethnicity and housing assignment. The interviewees were geographically diverse. During the site tour, the auditor informally interviewed (20) plus additional confined persons. This facility houses male and female confined persons.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>18</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor selected confined persons by age, race, ethnicity and housing assignment. The interviewees were geographically diverse. During the site tour, the auditor informally interviewed (20) plus additional confined persons. This facility houses male and female confined persons.</p>

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	<p>The auditor had no barriers completing confined person interviews. Staff ensured interviewees were readily available to the auditor for interview. No confined person refused interview with the auditor. All interviewed confined person were forthcoming and polite, all interviews were conducted in complete privacy.</p>
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	8
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was no confined person housed at the facility that was identified as having a physical disability during the on-site portion of the audit, this was confirmed through discussion with medical health staff.</p>
<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was no confined person housed at the facility that was identified as having a hearing disability or was deaf during the on-site portion of the audit, this was confirmed through discussion with mental health staff.</p>

<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was no confined person housed at the facility that identified as transgender or intersex during the on-site portion of the audit, this was confirmed through discussion with medical and mental health staff.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>There was no confined person housed at the facility that reported sexual abuse to interview during the on-site portion of the audit.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility had no confined person housed in segregation for the risk of sexual victimization during the 12-months preceding the audit. This was confirmed by reviewing housing logs and discussion with security staff.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The auditor did not over sample any select group, nor did the auditor have any barriers to completing targeted confined persons interviews.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>16</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The auditor selected random staff for interview using the Staff Roster; staff were selected by shift assignment, work assignment and rank. The auditor had no barriers completing interviews. All interviews were conducted in complete privacy.</p>

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	19
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	The auditor selected specialized staff for interview using the PRC Interview Protocol. During the on-site portion of the audit, there were no volunteers to interview. Medical staff interviewed are contracted to provide services through Wexford. Mental health staff are contracted through PSI-MED.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?

Yes

No

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

During the site review, the auditor observed insufficient numbers of audit notices posted. This was brought to the attention of administration and was immediately corrected. Additional signage was displayed in the administrative building, counselor's area and medical. The notices were observed in multiple areas accessible to confined persons, staff, contractors, volunteers and visitors. The institution has signage related to PREA and how to report posted throughout the facility in Spanish and English telling confined persons that Sexual Abuse and Harassment are not tolerated and how to report it. PREA Signs were observed prominently posted in all areas of the facility. The auditor informally interviewed confined persons during the site review; all were able to name multiple ways to report sexual abuse and sexual harassment. Many said the information is posted on the walls and that they have learned about PREA at this facility and other facilities they have been housed. Confined persons may report externally by calling the PREA Hotline Number and Office of PREA Compliance. Phones accessible to confined person were tested during the site review. Inmates say they can report to family members by phone, mail, or tablets. Confined persons who were informally interviewed indicated that staff makes rounds and that they see staff in the control rooms in living units and at count times. The facility has cameras to assist with supervision of confined persons and help deter sexual abuse and sexual harassment. Audit notices and PREA signage has been uploaded to all confined persons tablets.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>The auditor reviewed documents uploaded into the Online Audit System, when additional documentation was requested; the facility provided the information expeditiously. All requested documentation was provided to determine compliance with all PREA Standards.</p>
<p>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</p>	
<p>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</p>	
<p>Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.</p>	

92. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

93. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

95. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	The facility had no allegation of sexual abuse or sexual harassment during 12-months preceding the audit.

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) </p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) </p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>The facility had no allegation of sexual abuse or sexual harassment during 12-months preceding the audit.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The facility had no allegation of sexual abuse or sexual harassment during 12-months preceding the audit.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
- No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
- No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Identify the name of the third-party auditing entity

Diversified Correctional Services, LLC

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.11:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00 Subject - Prison Rape Elimination Act Compliance (PREA) 2. WV Inspector General Table of Organization 3. WVDCR Organizational Chart 4. Central Regional Jail and Correctional Facility Organizational Chart 5. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (3)</p> <ol style="list-style-type: none"> 1. Director of Office of PREA Compliance 2. Agency's PREA Coordinator

3. Facility PREA Compliance Manager

To decide compliance determination, the following observations were made during my on-site tour of the facility:

PREA signage observed posted on blue paper at the entrance to the facility on the front gate, entrance into the facility, medical, booking, and all housing units accessible to all staff, volunteers, contractors, confined residents, and visitors. PREA information is also found on confined persons tablets. Phones are located in housing units with Hotline dialing instructions in English and Spanish.

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.11 (a): The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.

Policy # 430.00, pages 2 - 4 include definitions: Contractors, Director of PREA Compliance, Exigent Circumstances, Gender Nonconforming, Intersex, Juvenile, Juvenile Facility, LGBTI, Medical Practitioner, Mental Health Practitioner, Offender, Office of PREA Compliance, PREA Coordinator, Preponderance of the Evidence, Sexual Abuse, Sexual Harassment, Staff, Staff Sexual Misconduct, Substantiated Allegation, Transgender, Unfounded Allegation, Unannounced Rounds, Unsubstantiated Allegation, Victim, and Volunteer.

In response to the Pre-Audit Questionnaire:

The West Virginia Division of Corrections and Rehabilitation has a policy to ensure compliance with the Prison Rape Elimination Act (PREA) by mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the Division of Corrections and Rehabilitation's approach to preventing, detecting, and responding to such conduct.

115.11 (b): The agency shall employ or designate an upper-level, agency-wide PREA Coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.

In response to the Pre-Audit Questionnaire:

The West Virginia Division of Corrections and Rehabilitation employs an upper-level staff PREA Coordinator that develops, implements, and oversees the agency compliance with all PREA Standards for all facility operated by the agency with all PREA Standards. The agency PREA Coordinator is identified on the WVDCR Organizational Chart.

Policy # 430.00, page 4 A states: WVDCR has zero tolerance for any acts of sexual abuse, assault, misconduct, or harassment. Sexual activity between staff and offenders, volunteers or contract personnel and offenders, regardless of consensual status, is prohibited and subject to administrative and criminal disciplinary sanctions

up to and including dismissal and prosecution pursuant to West Virginia Code and WVDCR Policy and procedure.

115.11 (c): Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

In response to the Pre-Audit Questionnaire:

The agency contracts with the County Commission of McDowell and Youth Services System for the confinement of confined persons; the agency PREA Coordinator ensure compliance with all PREA Standards.

Policy # 430.00, page 4 C states: Each facility Superintendent within WVDCR shall designate a PREA Compliance Manager, who will be the second highest ranking person. Those serving as PREA Compliance Managers within the Bureau of Juvenile Services upon the effective date of this policy will remain in effect at the discretion of the Director of PREA Compliance.

In response to the Pre-Audit Questionnaire:

The Superintendent at Central Regional Jail and Correctional Facility has designated Deputy Superintendent as the PREA Compliance Manager.

Policy # 430.00, in its entirety, addresses the agency's approach to ensure prevention, detection and responding to sexual abuse and sexual harassment. The policy is detailed and straight forward on:

I. Prevention Planning

II. Supervision and Monitoring

III. Staff Training

IV. Offender Education

V. Screening for Risk of Sexual Victimization and Abusiveness

VI. Reporting

VII. Official Response

VIII. Investigations

IX. Staff Discipline

X. Offender Discipline

XI. Medical and Mental Health

XII. Data Collection and Review

	<p>XIII. Audits</p> <p>XIV. Pertains Only to Juvenile Facilities</p> <p>The goal of the Office of PREA Compliance is to continually make every effort to prevent, detect, and respond to such conduct.</p> <p>The West Virginia Division of Corrections and Rehabilitation takes the Prison Rape Elimination Act very seriously. They have developed the Office of PREA Compliance (statewide) which deals strictly with the components of PREA. This Department reports to the Assistant Commissioner, Inspector General Bureau. The Office of PREA Compliance is made up of the Director, two (2) PREA Coordinators (one for prisons and jails, the other for juveniles) and a secretary. The two (2) PREA Coordinators oversee 36 facility Compliance Managers sixteen (16) prisons, ten (10) jails and ten (10) juvenile facilities). Each designated Compliance Manager is assigned only the responsibilities associated with PREA and reports to the Director of PREA Compliance and the Superintendent of the facility that they are assigned.</p> <p>Confined persons, staff, contractors and volunteers are trained in the zero-tolerance policy. They acknowledge and sign the PREA Acknowledgment Statement. The auditor reviewed Training Rosters documenting completion of PREA Training.</p> <p>Acknowledgement Statements for employees and contractors and volunteers affirms they have received training on the Department's Zero Tolerance Policy on Sexual Abuse and Sexual Harassment. They also acknowledge that violation of the policy will result in disciplinary action, including termination or being banned from entering any correctional institution.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.11 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.12:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Contracts with Youth Service and County Commission of McDowell

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (1)

1. Contract Monitor

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.12 (a): A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.

On or after August 20, 2012 or since the last PREA audit, whichever is later:

In response to the Pre-Audit Questionnaire:

The number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies: 2

The number of contracts that DID NOT require contractors to adopt and comply with PREA standards: 0

The agency reports that it has entered and/or renewed a contract with Youth Services System for the confinement of juvenile inmates and with County Commission of McDowell County since their last PREA audit. The auditor has reviewed contracts for both juvenile and adult offenders. Each of the reviewed contracts contained the same verbiage requiring the County Commission of McDowell County and Youth Services to adopt the PREA Standards and comply with them. They also acknowledged that the WV Division of Corrections and Rehabilitation monitors the facilities for compliance with all PREA Standards.

In response to the Pre-Audit Questionnaire:

The agency contracts with the County Commission of McDowell and Youth Services System for the confinement of confined persons; the agency PREA Coordinator ensure compliance with all PREA Standards.

On or after August 20, 2012, or since the last PREA audit, whichever is later, the number of contracts that DO NOT require the agency to monitor contractor's compliance with PREA standards: 0

115.12 (b): Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

Policy # 430.00, pages 4-5 C states: Any new contract or contract renewal for the confinement of offenders shall include an obligation to:

1. Comply with PREA Standards.

	<p>2. Comply with WVDCR policy.</p> <p>3. Ensure that the contracted facility is complying with the PREA standards by monitoring the facility performance.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.12 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115:13:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility 2020 PREA Staffing Review 3. Post Assignment Roster Special Duty Position List 4. Unannounced Rounds <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (3)</p> <ol style="list-style-type: none"> 1. Superintendent 2. PREA Compliance Manager 3. Intermediate or Higher-Level Staff (Unannounced Rounds) <p>In order to decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <p>Reviewed documentation of unannounced rounds.</p> <p>During the site tour the auditor observed security cameras strategically placed throughout the facility to help deter sexual abuse. Staff has constant “eyes on” eight housing units via viewing from the tower. The Shift Commanders make rounds daily and unannounced rounds twice a week. General population rounds are conducted every half hour. Security staff conduct rounds in the kitchen area and laundry area every half hour.</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p>

115.13 (a): The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.

Policy # 430.00, page 5 A states: WVDCR shall ensure that each of its facilities develops, documents and makes its best efforts to comply with the PREA staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect offenders against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

1. Generally accepted detention and correctional practices.
2. Any judicial finding of inadequacy.
3. Any findings of inadequacy from federal investigative agencies.
4. Any findings of inadequacy from internal or external oversight bodies.
5. All components of the facility's physical plant (including blind spots or areas where staff or offenders may be isolated).
6. The composition of the offender population.
7. The number and placement of supervisory staff.
8. Facility programs occurring on various shifts.
9. Any applicable State or local laws, regulations or standards.
10. Any prevalence of substantiated and unsubstantiated incidents of sexual abuse; and.
11. Any other relevant factors.

115.13 (b): In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan.

In response to the Pre-Audit Questionnaire:

Since August 20, 2012, or last PREA audit, whichever is later, the average daily

number of inmates: 365

Policy # 430.00, page 5 B states: In circumstances where the staffing plan is not complied with, the Facility PREA Compliance Manager or designee shall document the noncompliance, in writing, and justify all deviations from the plan. This documentation will be forwarded to the Facility's Superintendent, appropriate Assistant Commissioner and the Office of PREA Compliance.

In response to the Pre-Audit Questionnaire:

There have been no deviations from the staffing during the 12-months preceding the audit. The facility maintains staffing plan by overtime, freezing staff and calling staff in. The facility does not drop below minimum requirements.

115.13 (c): Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to ensure adherence to the staffing plan.

Policy # 430.00, pages 5-6 C states: Whenever necessary, but no less frequently than once a year, the Facility PREA Compliance Manager from each facility, in consultation with the Office of PREA Compliance, shall assess, determine and document whether adjustments are needed to:

1. The PREA staffing plans.
2. Prevailing staffing patterns.
3. The facility's deployment of video monitoring systems and other monitoring technologies.
4. The resources the facility has available to ensure adherence to the staffing plan.

115.13 (d): Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

Unannounced rounds are conducted four (4) times per month by upper-level staff.

Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

The auditor reviewed unannounced rounds sheets completed in 2023. The facility documents the times and facility locations the rounds occur, per policy the facility completes rounds on holidays, weekends, and on all shifts.

	<p>Policy # 430.00, page 6 D states: In an effort to identify and deter staff sexual abuse and sexual harassment, the Facility Superintendent shall ensure that the PREA Compliance Manager is completing unannounced rounds on all shifts. These rounds will be conducted in all areas of the facility, specifically in all offender living areas.</p> <p>Completion of unannounced rounds shall be documented in the appropriate database.</p> <p>Policy # 430.00, page 6 E states: In an effort to identify and deter staff sexual abuse and sexual harassment a minimum of four (4) unannounced rounds must be completed each month, two of those unannounced rounds must occur during the evening/overnight hours between 7:00 pm and 7:00 am. The overnight rounds must be completed by someone who arrives at the facility for the sole purpose of conducting the unannounced round. Two (2) rounds must be completed between the hours of 7:00 am and 7:00 pm. The unannounced rounds will be documented using PREA Compliance Manual Attachment 16 and submitted to the facility PCM monthly.</p> <p>Policy # 430.00, page 6 F states: Any staff member found to be alerting other staff that these rounds are occurring will be subject to disciplinary action unless such announcement is related to the legitimate operational functions of the facility.</p> <p>The facility has implemented the policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. These unannounced rounds occurred on night shifts as well as day shifts. The policy also prohibited staff from alerting other staff members that these supervisory rounds were occurring. The PREA Compliance Managers at facility reported that these rounds have been regularly completed over the last year. Rounds are documented via shift log and the Unannounced Rounds Form.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.13 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.14 (a-c). For the purposes of this audit, this auditor is not required to make a compliance determination for provision (a-c) of this standard. This facility does not house youthful offenders.

	<p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months:</p> <p>The number of youthful inmates housed at this facility: 0</p> <p>The number of housing units to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in day rooms, common areas, showers, and sleeping quarters: 0</p> <p>The number of youthful inmates placed in the SAME HOUSING UNIT as adults in this facility: 0</p> <p>In the past 12 months, the number of youthful inmates that have been placed in isolation in order to separate them from adult inmates: 0</p> <p>Comments: The facility reports that they do not house anyone younger than 18 years of age. During the site review, the auditor observed no youthful offenders on-site.</p> <p>Corrective Action: (None)</p>
--	---

115.15	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.15:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Policy Directive # 411.00; Subject: Gender Nonconforming Inmates/Residents 3. Policy Directive # 111; Subject - Training and Employee Development Training Curriculum Searches <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Non-medical staff (involved in cross-gender strip or visual searches) 2. Random Staff (16) 3. Confined Persons (18) 4. Transgender/Intersex Confined Persons (0) <p>To decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <p>The auditor reviewed camera placement and staff monitoring from the tower, all</p>

showers have doors, with partial openings at top and bottom of doors.

Toilet areas are located in the confined person's rooms behind doors, and cameras do not monitor confined persons rooms. All confined persons are required to be dressed while present in the dayrooms.

During the site-tour, the auditor informally interviewed both male and female confined persons; all stated they are never naked in view of the opposite sex. Informally interviewed staff confirmed shower and toilet areas are not monitor via cameras and these areas are behind closed doors.

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.15 (a): The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.

In response to the Pre-Audit Questionnaire:

In the past 12 months:

The number of cross-gender strip or cross-gender visual body cavity searches of inmates: 0

The number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff: 0

WVDCR Prohibits cross gender searches.

115.15 (b): As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

In response to the Pre-Audit Questionnaire:

In the past 12 months:

The number of pat-down searches of female inmates conducted by male staff: 0

The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstances: 0

115.15 (c): The facility documents all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female inmates.

Policy # 430.00, pages 6-7 H states: Staff shall not conduct cross gender pat-down, strip searches or cross-gender visual body cavity searches, except in exigent circumstances or when performed by medical practitioners in accordance with current

Policy. All exigent cross- gender searches will be documented via incident report. For a facility whose rated capacity does not exceed 50 offenders, the facility shall not permit cross-gender pat-down searches of female offenders, absent exigent circumstances. Facilities shall not restrict female offenders' access to regularly available programming or other out of cell opportunities to comply with this provision. If these searches occur, they shall be documented.

115.15 (d): The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.

This facility does not have open bay living units, all confined persons are housed single or multiple occupancy cells. The facility has sixteen living units.

Policy # 430.00, page 7 I states: Offenders shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. This limitation not only applies to in-person viewing, but also all forms of remote viewing as well.

Policy # 430.00, page 7 J states: Staff shall announce their presence every time they enter an offender housing unit of the opposite gender to indicate that there will be someone of the opposite gender on the unit.

115.15 (e): The facility will not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

Policy # 430.00, page 7 K states: Facilities shall not search or physically examine a transgender or intersex offender for the sole purpose of determining genital status. If unknown, staff should attempt to determine the genital status through conversations with the offender or by reviewing medical records.

During the on-site portion of the audit, there were no Confined Persons that identified as transgender or intersex to interview.

115.15 (f): The agency has trained security staff how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

One hundred percent of all security staff received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. During staff interviews, all staff confirmed that cross gender pat searches are not allowed, and pat

	<p>down searches are always performed by same gender staff. Staff were able to articulate what an exigent circumstance would be and were aware that only medical staff could perform body cavity searches. Interviews conducted with random female confined persons confirmed that they are always pat searched by female staff and are never prohibited from attending programs because a female staff is not available to pat search them.</p> <p>Policy # 430.00, page 7 L states: Staff shall be trained to conduct pat searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security.</p> <p>There were no confined persons housed at the facility during the on-site portion of the audit that identified as transgender/intersex to interview.</p> <p>Random staff interviewed stated that no cross-gender searches, visual body cavity searches or pat-downs have occurred at the facility; however, all staff have been trained to conduct searches. The facility provided training records for auditor’s review.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.15 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	--

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.16:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Homeland Language Services Contract 3. WV Interpreter Directory 4. Homeland Language Services, LLC. (effective 10-15-2022 - 10-14-2023) 5. Homeland Language Services User Instructions 6. End The Silence Brochures (English and Spanish) 7. Intake Packet with PREA Information 8. Brochure “End the Silence” (English and Spanish) <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p>

Specialized Staff (1)

1. Agency Head
2. Random Staff (16)
3. Confined Person with Hearing Disability (0)
4. Confined Person with Physical Disability (0)
5. Confined Person with Vision Disability (1)
6. Confined Persons with Cognitive Disabilities (2)
7. Limited English Proficient Confined Person (1)

In order to decide compliance determination, the following observations were made during my on-site tour of the facility:

Observed PREA signage in English and Spanish prolifically posted throughout the facility, phones with Hotline dialing instructions in English and Spanish. There was information posted WVFRIS service, an outside agency that provides support to confined person that have been sexually assaulted. Posters providing information on how to contact Homeland Language Services to provide translation services for limited English speaking confined persons. The auditor placed a call to the Homeland Language Services to verify availability.

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.16 (a) (b): The agency has taken appropriate steps to ensure that inmates with disabilities who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. The agency ensures that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.

During the on-site portion of the audit, the auditor interviewed three confined persons with disabilities and one LEP. One confined person identified to have a vision disability and two with cognitive disabilities. All three stated during the interview that they could report sexual abuse to staff or engage the assistance of others. Two confined persons indicated they could also report on their tablets.

Policy # 430.00, page 7 M states: Facilities shall take reasonable steps to ensure all offenders with disabilities and those who are limited English proficient have

meaningful access and equal opportunity to participate in or benefit from all aspects of the WVDCR's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility shall use the contracted translation services to facilitate communication with the offender. During staff interviews, staff confirmed that confined persons are never used as interpreters. The Homeland Language Services was utilized to interview the limited English proficient confined person. The auditor was able to conduct the interview and receive feedback via the interpreter without any difficulties or concerns. LEP confined persons are provided the PREA pamphlet "End the Silence" in Spanish.

Access to The Homeland Language Services was tested by auditor. LEP confined persons are provided the PREA pamphlet "End the Silence" in Spanish.

Policy # 430.00, page 7 N states: Written materials will either be delivered in alternative formats that accommodate the offender's disability or the information will be delivered through alternative methods, that ensure effective communication with offenders with disabilities, including those with intellectual disabilities, limited reading skills, or no or low vision. Reading the information to the offender or communicating through an interpreter will ensure that they understand the PREA related material. In addition to providing such education, the facility shall ensure that key information is continuously and readily available to offenders through posters, or other written formats.

115.16 (b) (c): The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first- response duties under §115.64, or the investigation of the inmate's allegations: 0

Policy # 430.00, page 7 O states: Only staff members or qualified contractors will provide translation for offenders. The WVDCR shall not rely on offender interpreters, readers, or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties, or the investigation of the offender's allegations.

Interviews with staff and Confined Persons related that inmate interpreters are not used. When someone needs an interpreter, Homeland Language Services is utilized. Written materials are given to inmates when they arrive at the facility and PREA signage is posted throughout the facility. Confined Persons interviewed with disabilities knew about PREA and were able to answer related questions. There was

	<p>no Confined Person that was limited English proficient to interview. The auditor tested access to Homeland Language Services.</p> <p>All new arrivals to the facility receive an "Intake Packet"; PREA education is within the information to include the "End the Silence" brochure. New intakes confirm education by signing the "PREA Training Confirmation for Jail Booking, Prison Intake and all Transfers" form. Confined Persons are provided a separate sheet with information on seven different ways to report and how to report sexual abuse and sexual harassment.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.16 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	--

115.17 Hiring and promotion decisions	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.17:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Policy Directive Number 132.02 3. Personnel Files of Staff New Hires 4. Personnel Files of Promotion 5. Personnel Files Contractors <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized (1)</p> <p>HR Staff (Human Resources Associate)</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.17 (a): The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3)</p>

Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

Potential employees, volunteers, and contractors who may have contact with confined persons are required to complete the "Sexual Misconduct Questionnaire".

Policy # 430.00, pages 7 - 8 P states: All individuals who may have contact with offenders will be asked to disclose previous misconduct during interviews for hiring, promoting or as part of reviews of current employees. Employees shall have a continuing affirmative duty to disclose any such misconduct. WVDCR shall not hire, promote or enlist the services of any person who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse or has been civilly or administratively adjudicated to have engaged in such activity. The WVDCR shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor, who may have contact with offenders. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. (115.17 (a) (b) (f) (g))

The WVDCR shall not hire or promote anyone who may have contact with inmates and shall not enlist the services of any contractor or vendor who may have contact with inmates who has: (PREA 115.17(a))

1. Engaged in sexual abuse in a prison, jail lock-up, community confinement facility, juvenile facility or other institution.
2. Been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or.
3. Been civilly or administratively adjudicated to have engaged in the activity described in this section.

115.17 (b): The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

The WVDCR considers any incidents of sexual harassment in determining whether to hire or promote anyone, or enlist the services of any contractor, who may have contact with offenders.

115.17 (c): Before hiring new employees, who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

Policy # 430.00, page 8 S states: Consistent with Federal, State, and local law, the

WVDCR must make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Unless prohibited by law or policy, the WVDCR shall provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer from whom the employee has applied to work. (115.17 (c) (h))

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks: 22

115.17 (d): The agency shall also perform a criminal background record check before enlisting the services of any contractor who may have contact with inmates.

Policy # 430.00, page 8 R states: A background investigation will be completed before hiring or promoting employees, enlisting the services of contractors, interns, or volunteers. The WVDCR shall conduct criminal background checks of all employees, volunteers, interns and contractors every four (4) years. (115.17 (d) (e))

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: 0

115.17 (e): The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.

An interview with the HR Manager confirmed background checks are completed every four years for all current employees.

115.17 (f): The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

115.17 (g): Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

115.17 (h): Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

	<p>The agency shall provide information to other institutional employers, as requested, on substantiated allegations of sexual abuse or sexual harassment involving a former or current employee who is seeking employment with the requesting institution.</p> <p>The interview with the HR Associate indicated when asked they provide this information.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.17 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	--

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.18:</p> <p>Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)</p> <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p> <ol style="list-style-type: none"> 1. Agency Head 2. Superintendent <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.18 (a): When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p> <p>In response to the PAQ, Central Regional Jail and Correctional Facility has had no expansion or modification during the 12-months preceding the audit.</p> <p>115.18 (b): When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse.</p>

	<p>In response to the PAQ, the facility indicated they have not installed cameras/video monitoring surveillance system since the last PREA Audit conducted in 2021.</p> <p>Policy # 430.00, page 8 T: When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the WVDCR shall consider the effect of the design, acquisition, expansion, or modification upon the WVDCR's ability to protect offenders from sexual abuse. The facility PCM will be responsible for consulting with the Office of PREA Compliance, when the facility is installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology; the WVDCR shall consider how such technology may enhance the WVDCR's ability to protect offenders from sexual abuse. (115.18 (a) (b))</p> <p>The facility in compliance with PREA Provision with based upon documentation provided and interviews conducted. Current operations and practices meet the requirements of PREA Standard 115.18.</p> <p>Corrective Action: (None)</p>
--	---

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.21:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. West Virginia Protocol Responding to Victims of Sexual Abuse 3. WVFRIS Contract 4. WVFRIS Locations Guide <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. SANE (prior interview) 3. Random Staff (16) 4. Confined Persons who Reported Sexual Abuse (0) <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p>

115.21 (a): To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.

The facility conducts administrative investigations; allegations of sexual abuse are conducted in conjunction with the West Virginia State Police.

115.21 (b): The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocol developed after 2011.

The protocol is adapted from the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," a comprehensive protocols developed after 2011.

Policy # 430.00, page 19 F states: Administrative and criminal investigations shall be conducted in accordance with best practice for the investigation of sexual assault and shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative procedures and criminal prosecutions. The protocol shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011 (115.21 (a) (b)).

115.21 (c): The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.

Medical staff at the facility does not conduct SANE exams, confined persons victims of sexual assault are transported to the local hospital where are SANE nurse will be called to conduct the exam.

Policy # 430.00, page 23 B states: Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. All victims of sexual abuse shall be offered access to forensic medical examinations at an outside facility; such examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. Offenders who may require SAFE/SANE exam may not refuse such exams at the facility level. The WVDCR shall

document efforts to provide a SAFE or SANE; if one is not available, the examination can be performed by other qualified medical practitioners. Treatment shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility shall maintain a SAFE/SANE log documenting when these services were attempted or utilized. (115.82 (a) (d)), (115.83 (g)), (115.21 (c))

Policy # 430, page 23 C states: The facility will use the list of local hospitals that employ a SANE, to determine the appropriate medical provider to transport to. Any refusal by the offender to undergo the forensic exam must be documented. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. (115.21 (c)) (115.82 (b))

In response to the Pre Audit Questionnaire:

The number of forensic medical exams conducted during the past 12 months: 0

The number of exams performed by SANES/SAFEs during the past 12 months: 0

The number of exams performed by a qualified medical practitioner during the past 12 months: 0

During the interview, the Health Services Administrator stated that no victim is ever charged for any examination, medical follow-up, or advocacy services (to include psychiatric care) related to sexual abuse or harassment. Additionally, all stated that forensic SANE examinations are conducted at the local hospital. The PREA Checklists are concise and well maintained. The facility Mental Health staff serves as an advocate should the inmate request one.

115.21 (d): The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g (b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

The agency has a contract with West Virginia Foundation for Rape Information Services to provide victims of sexual assault an advocate to accompany them during a SANE exam and provide emotional support.

115.21 (h): For the purposes of this section, a qualified agency staff member or a

qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

115.21 (g): The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.

The interview with the facility PREA Investigator verified the protocol taken in evidence collection. The interviews with staff confirmed that they were aware of the format to collect evidence if required to do so.

115.21 (e): As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

Policy # 430.00, pages 23 - 24 D states: The WVDCR shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the WVDCR shall provide a qualified staff member to provide these services. Agencies shall document efforts to secure services from rape crisis centers. If requested by the victim, a victim advocate, qualified WVDCR staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. To the extent the WVDCR itself is not responsible for investigating allegations of sexual abuse; the WVDCR shall request that the investigating agency follow the requirements within policy. (115.21 (d) (e))

115.21 (f): To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

The facility conducts the administrative investigations of allegations of sexual assault in conjunction with the WV State Police.

Policy # 430.00, page 19 E states: When an outside agency investigates sexual abuse, the WVDCR shall request that the investigating agency follow the medical and mental health requirements of this policy. CID shall endeavor to remain informed about the progress of the investigation and regularly update the Office of PREA Compliance throughout the investigative progress. (115.21 (f) (g)) (115.71 (I)) (115.22 (b))

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.21 based upon documentation provided and interviews conducted.

	Corrective Action: (None)
--	---------------------------

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.22:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p> <ol style="list-style-type: none"> 1. Agency Head 2. CID Investigator <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.22 (a): The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <p>Policy # 430.00, page 16 A states: Protection of witnesses and the victim shall be paramount throughout the investigation process. The Office of PREA Compliance, in conjunction with the facility PCM shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.</p> <ol style="list-style-type: none"> 1. Individuals conducting these investigations will receive specialized training. 2. Staff members, as designated by the Superintendent, shall conduct an inquiry on offender on offender harassment allegations. 3. CID investigators will conduct investigations on all staff on offender allegations and offender on offender sexual abuse allegations. 4. CID investigators will be primarily responsible for contacting and referring criminal allegations and assisting as needed with the investigation. 5. Investigations will be promptly, thoroughly, and objectively completed for all allegations, including third party and anonymously reported allegations. The reports

and all related documentation are to be entered in the appropriate tracking system.

6. Staff having any knowledge of or reason to suspect that sexual misconduct has taken place, is subject to questioning by person(s) investigating such allegations.

Failure to cooperate with the investigation, such as withholding known information, withholding evidence or giving false statements will result in disciplinary action.

In response to the Pre-Audit Questionnaire:

The facility reported six (6) allegations of sexual abuse or sexual harassment that occurred during the 12-month period prior to the audit which required an administrative investigation.

In the past 12 months, the number of allegations referred for criminal investigation: 0

115.22 (b): The agency has in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency publishes policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals.

Policy # 430.00, page 19 E states: When an outside agency investigates sexual abuse, the WVDCR shall request that the investigating agency follow the Medical and Mental Health requirements of this policy. CID shall endeavor to remain informed about the progress of the investigation and regularly update Office of PREA Compliance throughout the investigative progress.

115.22 (c): If a separate entity is responsible for conducting criminal investigations, publication describes the responsibilities of both the agency and the investigating entity.

Policy # 430.00, page 16 C states: Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

115.22 (c): WVDCR conducts its own criminal investigations and therefore, it's investigative responsibilities pertain only to the agency itself. Provision (c) is not applicable in determining compliance with Standard 115.22.

All PREA allegations are filtered through the PREA Compliance Manager. He forwards reports to the investigator and the Office of PREA Compliance. All allegations are investigated. All completed Sexual Assault Investigations, whether substantiated or unsubstantiated are sent to the West Virginia State Police.

115.22 (d): For purposes of this audit, this auditor is not required to make a compliance determination for provision (d) of this standard.

	<p>115.22 (e): For purposes of this audit, this auditor is not required to make a compliance determination for provision (e) of this standard.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.22 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to determine compliance for this standard, the following policies and other documentation were reviewed for standard 115.31:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Policy Directive # 111; Subject: Training and Employee Development 3. Homeland Language Services Instructions 4. WVDCR Orientation PREA Training Curriculum 5. Instruction Cross Gender Viewing Searches Curriculum 6. Lesson Plan - Prison Rape Elimination Act for Employees and Contract Staff 7. PREA Training Orientation Handout 8. Central Regional Jail and Correctional Facility Pre- Audit Questionnaire 9. In Service Training Logs/Certificates of Understanding (61) <p>To decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Random Staff</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.31 (a): The agency trains all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment</p>

victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

The PREA Lesson Plan Performance Objectives include: Defining WVDCR's Zero Tolerance Policy and key definitions; Learn about inmate's right to be free of abuse, harassment and retaliation; Defining your responsibilities under WVDCR policy; Understand announcements and searches; List which inmates are particularly vulnerable to abuse; Understand the common reactions to sexual abuse; Learn how to detect signs of threatened and actual sexual abuse; Define First Responder duties; Explain how to handle disclosures; Explain how to complete an incident report; Explain false reports and how to handle them; Learn how to communicate professionally and respectfully with inmates, including LGBTI inmates; and Define how to avoid (in) appropriate relationships.

Policy Directive # 111, page 5 - 6 states: OJT, Basic, and In-Service Training for any person who works in or with the WVDCR, including vendors, contractors, and volunteers, shall minimally include:

- A. The zero-tolerance policy for sexual abuse and sexual harassment.
- B. How to fulfill their responsibilities under the WVDCR's sexual misconduct prevention, detection, reporting, and response policies and procedures.
- C. Inmates/residents right to be free from sexual abuse and sexual harassment, and the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- D. The dynamics of sexual abuse and sexual harassment in confinement.
- E. The common reactions of sexual abuse and sexual harassment victims.
- F. How to detect and respond to signs of threatened and actual sexual abuse.
- G. How to avoid inappropriate relationships with inmates/residents.
- H. How to communicate effectively and professionally with everyone, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming persons.
- I. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- J. All such training shall be tailored to the gender of the inmates/residents at the employee's facility, and employees shall receive additional training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.
- K. Each employee will complete refresher training at least every two (2) years to

ensure that all employees know the WVDCR's current sexual abuse and sexual harassment policies and procedures; in years in which an employee does not receive refresher training, the employee shall be provided refresher information on current sexual misconduct policies.

L. All such training shall be documented through employee signature or electronic verification that employees understand the training they have received.

115.31 (b): Training is tailored to the gender of the inmates at the employee's facility. The employee receives additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa.

This facility houses male and female confined persons, staff are trained for both genders.

Policy # 430.00, page 9 D states: Staff training shall be appropriate to the gender of the offenders within the facility.

115.31 (c): Current employees who have not received training are trained within one year of the effective date of the PREA standards, and the agency provides each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

Employees receive PREA training annually. New hires receive PREA training during In Service training, security staff also receives PREA training at the Division's Training Academy.

Policy # 430.00, page 9 E states: The WVDCR shall provide employees with a yearly refresher to ensure that all employees know the current sexual harassment policies and procedures.

Facilities shall ensure that volunteers and contractors who have contact with offenders have been trained on their responsibilities under the WVDCR's sexual abuse and sexual harassment prevention, detection and response policies and procedures. The level and type of training provided to volunteers and contractors shall be based on the services that they provide and level of contact they have with offenders, but all volunteers and contractors who have contact with offenders shall be notified on the WVDCR's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

115.31 (d): The agency documents, through employee signature or electronic verification, those employees understand the training they have received. The facility provided the auditor with 61 training logs containing initial PREA training logs and annual in service training logs with staff's signatures.

Policy # 430.00, page 9 C states: Each facility shall document through a Certificate of Understanding that staff, volunteers and contract employees have received and

	<p>understand the training they have received. Documentation will be filed in the employee training folder and a copy will be sent to the Office of PREA Compliance.</p> <p>Training files were also reviewed during the on-site visit. All files reviewed confirmed that the training is up to date and signatures were readily available. Interviews with staff confirmed they are aware of the components of PREA.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.31 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	---

115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.32:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. PREA Handout for Contractors and Volunteers 3. In Service Training Files 4. Certificates of Understanding (7) 5. Medical and Mental Health NIC Training Certificates (8) 6. Contractors and Mentors Training for Volunteers and Contractors 7. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following person was interviewed, and the following interview finding were considered:</p> <p>Specialized Staff:</p> <ol style="list-style-type: none"> 1. Contractors (2) Medical and Mental Health <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.32 (a): The agency ensures that all volunteers and contractors who have contact with inmates are trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>The number of volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and</p>

sexual harassment prevention, detection, and response: 23

Contractors and volunteers receive the same PREA training as all employees. The facility provides the auditor was In Service training logs for review.

Policy # 430.00, page 8 A states: A. All employees, contractors, volunteers and interns will receive training regarding WVDCR's zero tolerance policy regarding sexual misconduct. This training should be conducted during orientation, but no later than thirty (30) days after date of hire.

115.32 (b): The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

All volunteers and contractors who have contact with inmates have been trained on the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Policy # 430.00, page 9 E states: The level and type of training provided to volunteers and contractors shall be based on the services that they provide and level of contact they have with offenders, but all volunteers and contractors who have contact with offenders shall be notified on the WVDCR's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

115.32 (c): The agency maintains documentation confirming that volunteers and contractors understand the training they have received.

The facility maintains documentation confirming that volunteers and contractors understand the training they have received. In Service logs were reviewed by the auditor, these logs contained signature confirming they received the PREA training.

Policy # 430.00, page 9 C states: Each facility shall document through a Certificate of Understanding that staff, volunteers and contract employees have received and understand the training they have received. Documentation will be filed in the employee training folder and a copy will be sent to the Office of PREA Compliance.

Policy # 430.00, page 9 E states: The WVDCR shall provide employees with a yearly refresher to ensure that all employees know the WVDCR's current sexual harassment policies and procedures. Facilities shall ensure that volunteers and contractors who have contact with offenders have been trained on their responsibilities under the WVDCR's sexual abuse and sexual harassment prevention, detection and response policies and procedures.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.32 based upon documentation provided and interviews conducted.

Corrective Action (None)

--	--

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>To decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.33:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. PREA Orientation Brochures (English and Spanish) 3. Certificates of Understanding (50) 4. Review of Confined Person Files 5. PREA Posters 6. Brochure "End the Silence" (English and Spanish) 7. Hotline Dialing Instructions 8. Homeland Language Services User Guide 9. Confined Persons Intake Packet with PREA Education 10. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Intake Staff <p>Confined Persons with Disabilities</p> <ol style="list-style-type: none"> 1. Cognitive (2) 2. Vision (1) 3. LEP (1) <p>In order to decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <ol style="list-style-type: none"> 1. Observations of prominently posted PREA materials in housing units and common areas. Hotline dialing instructions posted near phones. Posted information on ways to report sexual abuse and sexual harassment. Addresses for reporting sexual abuse and harassment, and email address. Contact information for WV Foundation Rape Information Service was posted throughout the facility. The user guide for the Homeland Language Services (translation) was prominently posted throughout the facility. 2. Informally interviewed Confined Persons, staff, and contractors during the site

review. Confined persons were able to pull up PREA related information on assigned tablets for auditor to review during site review.

3. Intake Screening Process was observed during the site review, all intake confined persons receive the PREA training during booking.

4. The auditor's observation of cameras in the control booth confirmed cameras do not monitor the shower and toilet areas, cameras are monitor 24/7 by staff. Each dorm has two cameras, one placed at the rear of the dorm and one place in the front of the dorm.

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.33 (a): During the intake process, inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Inmates receive information during the intake process about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Confined persons sign Certificates of Understanding confirming receipt of training.

Policy # 430.00, page 9 - 10 A states: During the intake process, offenders shall receive educational information explaining, in an age appropriate fashion, the WVDCR's zero-tolerance policy on sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or harassment. This information shall be communicated verbally, in writing and in language clearly understood by the offender. The curriculum may be provided to offenders individually or in groups. At a minimum, the offender shall receive:

1. Information regarding the agencies reporting procedures.
2. Information related to access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations.
3. The facility shall inform offenders, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

In response to the Pre-Audit Questionnaire:

The number of inmates admitted during past 12 months who were given this information at intake: 2534

115.33 (b): Within 30 days of intake, the agency provided comprehensive education to inmates in person and through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such

incidents, and regarding agency policies and procedures for responding to such incidents.

In response to the Pre-Audit Questionnaire:

The number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake: 961

115.33 (c): Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.

All confined persons receive training within 24-72 hours of arrival to the facility. Offenders shall receive PREA education upon each transfer to a different facility. The offender shall be provided a handbook, in addition to PREA training. Documentation of offender participation in these education sessions shall be scanned into the offender's record in OIS Document Management and maintained by the facility PCM as directed.

115.33 (d): The agency provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.

Written materials will either be delivered in alternative formats that accommodate the offender's disability or the information will be delivered through alternative methods, that ensure effective communication with offenders with disabilities, including those with intellectual disabilities, limited reading skills, or no or low vision. Reading the information to the offender or communicating through an interpreter, will ensure that he or she understands the PREA related material. In addition to providing such education, the facility shall ensure that key information is continuously and readily available to offenders through posters, or other written formats. PREA information can also be found on confined persons tablets. Many confined persons interviewed, state they would make a PREA via their tablet.

115.33 (e): The agency maintains documentation of inmate participation in these education sessions.

The offender shall sign an acknowledgement of receiving the PREA training and PREA related materials. This documentation shall be scanned into the offender's record in Offender Information System (OIS) Document Management and retained by the facility PCM as directed.

115.33 (f): The agency ensures that PREA information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.

In addition to providing such education, the facility shall ensure that key information

	<p>is continuously and readily available to offenders through posters, or other written formats.</p> <p>The auditor observed the intake/booking process. Inmates receive PREA information via handout, discussion and video. For those inmates who have limited English proficiency, the Homeland Language Services are utilized. In case of visually impaired or an inmate with cognitive disabilities, staff related counselors and education staff are there to review the information with them. All inmates are required to view PREA video on kiosk prior to gaining initial access to equipment. All interviewed inmates confirmed they received PREA information and watched the video on the kiosk. The auditor reviewed booking packets containing "PREA Training Confirmations" signed by the inmates. It was recommended that all offenders have refresher training; this was completed by the PREA Coordinator for the Prisons and Jails while auditor was on-site.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.33 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.34	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.34:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; pages 9 - 10 F -G Subject - Prison Rape Elimination Act Compliance (PREA) 2. Verification of Training of Investigators Records Miranda, Garrity, PREA, Training Curriculum 3. Review of Sexual Assault Victims in A Confinement Setting Training PREA 4. Report Writing Training 5. NIC Training Certificates (8) 6. Memo Dated July 2023 7. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p>

1. Investigator (CID)
2. Facility Investigator

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.34 (a): In addition to the general training provided to all employees pursuant to § 115.31, the agency ensures that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.

Four staff members have completed the NIC training “Investigating Sexual Abuse in Confined Settings”.

115.34 (b): Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Investigative staff receives training in the proper use of Miranda and Garrity warnings, and evidence collection.

115.34 (c): The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

Specialized training is documented through training certificates.

In response to the Pre-Audit Questionnaire:

The number of investigators currently employed who have completed the required training: 4

115.34 (d): Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

115.34 (d). For the purposes of this audit, this auditor is not required to make a compliance determination for provision (d) of this standard. Policy # 430.00, pages 9 – 10 F states: In addition to the general training provided to all employees pursuant to § 115.31, the WVDCCR shall ensure that, to the extent the WVDCCR itself conducts sexual abuse investigations; its investigators have received training in conducting such investigations in confinement settings. Corrections Investigations Division (CID) investigative staff shall receive additional specialized training on conducting sexual abuse investigations in confinement settings.

Documentation will be filed in the employee training folder and a copy will be sent to the Office of PREA Compliance. This specialized training will include but is not limited to:

1. Interviewing sexual abuse victims.

	<p>2. Proper use of Miranda warnings and the Garrity rule.</p> <p>3. Sexual abuse evidence collection in confinement settings.</p> <p>4. The criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.</p> <p>The facility provided certificates for investigators. These records include verification of NIC training PREA: Your Role Responding to Sexual Abuse, completion of the Miranda Rights and Garrity Warning Training, completion of the Report Writing – PREA Investigations and completion of the Interview of Sexual Assault Victims in a Confinement Setting and Investigating Sexual Abuse in a Confinement Setting.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.34 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.35:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject – Prison Rape Elimination Act Compliance (PREA) 2. NIC Training Certificates Medical and Mental Health 3. In Service Training logs of Medical and Mental Health 4. Central Regional Jail and Correctional Facility Pre- Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Medical <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.35 (a): The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally</p>

to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. Medical and mental health staff have received specialized training, this is documented through NIC training certificates.

In response to the Pre-Audit Questionnaire:

The number of all medical and mental health care practitioners who work regularly at this facility who received the training: 19

The percent of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: 100%

Policy # 430.00, page 10 G states: In addition to the general training provided by the facility during Orientation, all full- and part-time medical and mental health staff shall receive additional specialized training regarding victims of sexual abuse and sexual harassment. This training will be coordinated and completed by a qualified source. All medical staff must receive this training during orientation, but no later than one (1) month of the effective date of hire.

This specialized training will include, but is not limited to:

1. How to detect and assess signs of sexual abuse and sexual harassment.
1. How to preserve physical evidence of sexual abuse.
2. How to respond effectively and professionally to victims of sexual abuse and sexual harassment.
3. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

The interviews with the medical and mental health staff confirmed that not only do they complete the required training at the facility and through NIC, but also through Wexford. Wexford provides training monthly; one of those months is dedicated to PREA. The training logs for Health Services staff confirmed completion of required facility training. Wexford training records are not kept on site. Medical staff at this facility does not conduct forensic examinations; SANE nurses are called to conduct exams at a local hospital.

115.35 (b): If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.

Contracted medical staff employed by the WVDCR does not conduct forensic examinations.

115.35 (c): The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the

	<p>agency or elsewhere.</p> <p>Specialized training is documented through training certificates. All medical and mental health staff have completed required training, the facility provided training certificates for review.</p> <p>115.35 (d): Medical practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.35 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.41:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Screening Instrument 3. Initial and Reassessments 4. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Staff Responsible for Risk Screening 2. Random Confined Persons <p>In order to decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <p>Observation of the Initial Intake PREA process, Observation of records room. During the site-tour the auditor informally interviewed confined persons.</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.41 (a): All inmates are assessed during initial intake screening and upon transfer</p>

from another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.

115.41 (b): Intake screening shall ordinarily take place within 72 hours of arrival at the facility.

In response to the Pre-Audit Questionnaire:

The number of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: 2534

115.41 (c): Assessments are conducted using an objective screening instrument.

115.41 (d): The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes.

115.41 (e): The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

115.41 (g): An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Policy # 430.00, pages 11-12 A states: All offenders shall be assessed individually and in a private setting during intake screening and upon transfer to another facility for their risk of being sexually abused by other offenders or sexually abusive toward other offenders prior to housing in general population.

Policy # 430.00, page 10 B states: The screening will occur:

1. Within 72 hours of intake.
2. Upon transfer to a new facility.
3. After an incident of sexual abuse.
4. Or when warranted due to a referral, request, or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.

Policy # 430.00, page 11 C states: This shall be accomplished by using an objective

PREA Screening Instrument to gather the following information:

1. Known or perceived gender nonconforming appearance or identifies as lesbian, gay, bisexual transgender or intersex (LGBTI) and whether the offender may therefore be vulnerable to sexual abuse.
2. Whether the offender has a mental, physical, or developmental disability.
3. Offender's age and physical build.
4. Current charge, offense history and whether the offender has been previously incarcerated for convictions for sex offenses against an adult or child or a history of acts of sexual abuse.
5. Whether the offender's criminal history is exclusively non-violent.
6. Whether the offender has previously experienced sexual victimization.
7. The offender's own perceptions of her or his vulnerability.
8. Any specific information about individual offenders that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other offenders.
9. Whether the offender is detained solely for civil immigration purposes.

Policy # 430.00, page 11 D/E states: The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the WVDCR, in assessing offenders for risk of being sexually abusive. This information shall be ascertained through:

1. Conversations with the offenders during the intake process.
2. Medical and mental health screenings.
3. During classification assessments.
4. By reviewing court records, case files, facility behavioral records, and other relevant documentation from the offender's files.

Policy # 430.00, page 13 F states: Facility staff and contractors involved in the assessment process will not disseminate responses to the screening are assigned to general population will be identified. This information will be documented in the offender's file, and in the appropriate database. Offenders may not be disciplined for refusing to answer or for not disclosing complete information. If an offender refuses to disclose the information requested, housing placement should be based on a review of the offender's records or other sensitive information which may be exploited to the offender's detriment by staff or other offenders. Offenders determined to be at risk for sexual victimization if assigned to the general population will be identified. This information will be documented in the offender's file, and in the appropriate database. Offenders may not be disciplined for refusing to answer or for not

disclosing complete information. If an offender refuses to disclose the information requested, housing placement should be based on a review of the offender's records.

115.41 (f): Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

Policy # 430.00, page 12 G states: The Superintendent shall designate specific staff to complete PREA reassessments. PREA reassessment shall be completed within a set time period, not exceeding 30 days from the offender's arrival at the facility. The facility will reassess the offender's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to questions.

A review of documentation uploaded to the PREA OAS was reviewed, which led the auditor to seek additional clarification regarding the assessment/reassessment process. While on site this auditor observed the intake process and reviewed additional randomly selected confined persons files, Auditor's on-site observation determined that the initial assessment process was void of privacy and additional file reviews confirmed that reassessments were not being conducted timely. This information was immediately communicated to facility administrative staff and corrective measures were discussed to address both issues. The decision was made to immediately move the initial assessment process to the body scan room which would provide the required privacy.

The auditor recognizes the hard work that the audit team has exhibited to show compliance. Per the auditor request eight weeks of reassessments documentation was provided to the auditor. During the corrective action period auditor reviewed documents of assessments PREA education acknowledgement and reassessments.

Based on the review of the agency policy and procedures, observations of information obtained through staff interviews, review of documentation, and follow up documentation, the facility has demonstrated full compliance with the standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.42:

1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00 Subject - Prison Rape Elimination Act Compliance (PREA)
2. Policy Directive # 411.00; Subject: Gender Nonconforming Inmates/Residents Policy
3. List of Confined Persons that Report Prior Victimization
4. Count Housing Code
5. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (2)

1. PREA Compliance Manager
2. Staff Responsible for Risk Screening
3. Transgender/Intersex (0)

In order to decide compliance determination, the following observations were made during my on-site tour of the facility:

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.42 (a): The agency uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.

115.42 (b): The agency makes individualized determinations about how to ensure the safety of each inmate.

Policy # 430.00, page 14 states: The PREA screening assessment information shall be used to make decisions regarding housing, bed, and work, education, and program assignments. The goal of the WVDCR is to keep offenders that are at high risk for being sexually victimized from those at high risk of being sexually abusive. The facility shall make individualized determinations about how to ensure the safety of each offender.

115.42 (c): In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems.

There were no confined persons housed at the facility during the on-site portion of the audit that identified as transgender or intersex to interview.

Policy # 430.00, page 14 K states: The WVDCR shall not consider Lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. The facility shall consider the offender's health and safety when determining placement. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the WVDCR shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present management or security problems.

115.42 (d): Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.

The interviews with the Facility PREA Compliance Manager and staff who conduct risk assessments confirmed transgender and intersex confined persons are reassessed every six months and as needed.

115.42 (e): A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

115.42 (f): Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

115.42 (g): The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

Policy # 430.00, page 14 L states: All staff, volunteers, and contractors will communicate with, treat, and talk about any offender who is LGBTI, or perceived to be LGBTI, in a professional and respectful manner. Placement and programming assignments for each transgender or intersex offender shall be reassessed twice a year. Staff will take into consideration the facility population, staffing patterns, physical layouts and legal requirements. LGBTI offenders will not be placed in dedicated facilities or units solely based on such identification or status. A transgender or intersex offender's own views with respect to his or her own safety shall be given serious consideration. Transgender and intersex offenders shall be given the opportunity to shower separately from other offenders.

When Assessments and Reassessments are completed, the forms are placed in the inmate files. These files are kept behind a locked door with limited access. The information is also entered into the Inmate Database. LGBTI offenders are not housed in dedicated housing units; they are housed in the general population. In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, and in making other housing and programming assignments, the WVDCR shall consider on a case-by-case basis whether a placement would ensure the offender's health and safety, and whether the placement would present security problems.

	<p>The interview with staff that performs risk assessments indicated the agency/facility uses information from screening to make informed decisions on housing, bed, work, education and program assignments with the goal of keeping those at high risk of being sexually victimized from those at high risk of being sexually abusive. The auditor observed during the tour of the facility that all housing units have single showers, with curtains which allows all confined persons the privacy to shower separately without others viewing them. The facility had zero (0) transgender/intersex confined person to interview during the on-site portion of the audit.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.42 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.43	Protective Custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.43:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Superintendent 2. Confined Persons in Segregated Housing (0) <p>In order to decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <p>115.43 (a): Inmates at high risk for sexual victimization are not placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>The agency has a policy prohibiting placing inmates at high risk for sexual</p>

victimization in involuntary segregated housing unless all available alternatives has been made and there is no available alternative means of separation from a likely abuser.

In response to the Pre-Audit Questionnaire:

The number of inmates at risk of sexual victimization who were held in involuntary segregation housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0

In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0

Policy # 430.00, page 14 - 15 N states: If an involuntary segregation housing assignment is made, the facility PREA Compliance Manager shall clearly document the following:

1. The basis for the staff member's concern for the offender's safety.
2. The other alternative means of separation that were explored.
3. The reason why no alternative means of separation can be arranged.

Policy # 430.00, page 15 0 states: Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment.

115.43 (b): Inmates placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.

If the facility restricts programming, education, work details, or privilege, the reasons must be documented. The facility has not placed any confined person in segregated housing that was a risk of sexual abuse during the 12-months preceding the audit.

115.43 (c): The facility will place inmates into involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: 0

	<p>115.43 (d): If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged: 0</p> <p>115.43 (e): Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.</p> <p>If a confined person is place in involuntary segregated housing, the facility affords each confined person a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p>Policy # 430.00, page 15 0 states: Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.43 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.51:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Training Brochures (English and Spanish)

3. Intake Packet
4. Orientation Information with PREA Information
5. Certificates of Understanding
6. Confined Person's Handbook with PREA Reporting Information
7. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (1)

1. Facility PREA Compliance Manager
2. Random Staff (16)
3. Random Confined Persons (18)
4. Targeted Confined Persons (8)

In order to decide compliance determination, the following observations were made during on-site tour of the facility:

PREA reporting information was posted prolifically throughout the facility, Hotline dialing instructions were posted near phone in the day-rooms accessible to confined persons. Numbers and addresses, and the email address were posted for the WVDCR PREA Compliance Office. Posted PREA information was posted in areas accessible to visitors.

Confined persons are issued tablets; interviewed random, targeted, and informally interviewed confined persons state they could report sexual abuse on their tablet in private. The agency has a policy allowing confined persons to file grievance reporting sexual abuse.

During the site review, the auditor placed test calls to the PREA Hotline, the auditor received an email confirmation the calls were received. Auditor was also able to view a report made by a confined person via assigned tablet. Confined persons are allowed to send legal and personnel mail to outside parties. Confined persons can also send mail electronically via email.

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.51 (a): The agency provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials sexual abuse or sexual harassment; retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have contributed to an incident.

115.51 (b): The agency shall also provide at least one way for inmates to report

abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

The agency provides multiple ways for confined persons to report abuse or harassment to a public or private entity or local police that is not part of the agency.

This facility does not house confined persons solely for civil immigration purposes.

Policy # 430.00, page 15 A states: Offenders shall be provided multiple internal and external ways to privately report sexual misconduct, retaliation by other offenders or staff for reporting sexual abuse, sexual harassment, staff neglect or violation of responsibilities that may have contributed to such incidents. The WVDCR shall also provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the WVDCR, and that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to WVDCR officials, allowing the offender to remain anonymous upon request. Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. The WVDCR shall distribute publicly through the WVDCR website the e-mail, address and information on how to report sexual abuse and sexual harassment on behalf of the offender and the WVDCR policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigations.

115.51 (c): Staff accept all reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. If a staff member receives a report of sexual abuse or sexual harassment, they are required to report to their supervisor immediately.

Policy # 430.00, page 15 B states: All employees, contractors, volunteers and interns are mandatory reporters and shall accept verbal, written, anonymous and third-party allegations from offenders who observe, are involved in, or have any knowledge, information or suspicion of sexual abuse, harassment, or an inappropriate relationship. All reports shall be promptly documented and reported to the facility Superintendent and facility PCM. Staff may be subjected to disciplinary action if they do not report such conduct. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse.

Policy # 430.00, page 14 C states: Staff can privately report information about sexual assault and sexual harassment by submitting a confidential report to the Superintendent, PREA Compliance Manager or the Office of PREA Compliance.

115.51 (d): The agency provides a method for staff to privately report sexual abuse and sexual harassment of inmates.

The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Staff member can make a report of sexual abuse of harassment via phone calling the hotline, the WVDCR website via email, the PREA Compliance Manager, or write a confidential incident report.

Policy # 430.00, page 15 C states: Staff can privately report information about sexual assault and sexual harassment by submitting a confidential report to the Superintendent, facility PCM or the Office of PREA Compliance.

Interviews staff and confined persons were able to share the different ways they could report privately and anonymously. Staff stated if they received a report in any form, written or verbal, they would immediately report the incident and complete an Incident Report by the end of their shift.

Each housing unit has a minimum of one telephone, one kiosk, and every offender is assigned a tablet that can be utilized to call a rape crisis hotline and outside PREA reporting line that would allow for anonymous reporting. The calls are at no cost. A test of the phone by the auditor confirmed that it connected to the crisis line.

Confined persons are provided the following information of ways to report sexual abuse and sexual harassment during orientation, the information is also found in the Confined Persons Handbook:

Report the information to anyone you trust, staff member, facility PREA Compliance Manager, family members, attorneys or outside advocates.

Request to see medical or mental health. Submit a written complaint.

Notify outside law enforcement, local, county or state. Call the Office of PREA Compliance 304-558-2036.

Mail the complaint to WVDCR Office of PREA Compliance 1409 Greenbrier Street, Charleston WV 25311.

You can also visit <https://dcr.wv.gov/aboutus/Pages/prea.aspx>. Email your complaint to dcrprea@wv.gov.

And other methods described in your offender handbook.

While on site the auditor noted limited PREA signage and audit notices. This concern was communicated to facility administration. Auditor was given the explanation that copies of all signage had been uploaded on individually assigned tablets. Auditor provided clarification that for compliance to this standard signage must be clearly visible in all areas, visible to staff, confined persons and visitors. While placing signage on tablets is acceptable it does not replace posted signs.

Prior to completion of site visit acceptable PREA signage and audit notices had been placed in all areas of facility.

Prior to completion of site visit acceptable PREA signage and audit notices had been placed in all areas of facility.

Based on review the agency policy and procedures, observations and information

	<p>obtained through staff, confined persons interviews, review of documentation , and follow-up documentation, the facility has demonstrated full compliance with this standard. Of interviews conducted.</p>
--	---

115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.52:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Confined Person’s Handbook 3. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Targeted Confined persons who Reported a Sexual Abuse (0)</p> <p>In order to decide compliance determination, the following observations were made during on-site tour of the facility:</p> <p>PREA reporting information was post prolifically throughout the facility; hotline dialing instructions were posted near phone accessible to confined person. Numbers and addresses, and the email address were posted for the WVDCR PREA Compliance Office. Posted PREA information was posted in all areas accessible to confined person, and also posted in areas accessible to visitors.</p> <p>Confined persons are issued tablets, interviewed random, target, and informally interviewed confined persons state they could report sexual abuse on their tablet. The agency has a policy allowing confined persons to file grievance reporting sexual abuse.</p> <p>Confined persons are allowed to send legal and personal mail to outside parties. Confined persons can also send mail electronically via email.</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.52 (a): An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p>

The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. Grievances can be filed on confined person issued tablet.

115.52 (b): (1) The agency does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired. Allegations regarding sexual abuse/sexual harassment submitted via grievances are forward immediately forwarded for investigation.

Agency policy or procedure allows a confined person to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Grievances are forward immediately forwarded for investigation.

Policy # 430.00, page 16 D states: An offender may also report abuse by using the WVDCR grievance process. There is no time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. The WVDCR may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. The WVDCR shall not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. Nothing in this section shall restrict the WVDCR's ability to defend against an offender lawsuit on the ground that the applicable statute of limitations has expired. The agency shall ensure that:

1. An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and.
2. Such grievance is not referred to a staff member who is the subject of the complaint.

115.52 (c): The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint.

The agency's policy and procedure allows a confined person to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

115.52 (d): (1) The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3)

The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The

agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level.

The agency's policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of grievances filed that alleged sexual abuse: 0

Policy # 430.00, page 16 E states: WVDCR shall issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance.

115.52 (e): (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

Agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates.

115.52 (f): (1) The agency establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days.

The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

The agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual

abuse.

Policy # 430.00, page 16 F states: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, are permitted to assist offenders in filing reports or grievances and requests for administrative remedies relating to allegations of sexual abuse. Third parties are also permitted to file such requests on behalf of offenders. CID will discuss the allegation with the alleged victim and proceed with an investigation if the allegation occurred in a correctional setting.

115.52 (f): (1) The agency establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

In response to the Pre-Audit Questionnaire:

The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: 0

The number of those grievances in 115.52(e)-3 that had an initial response within 48 hours: 0

The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days: 0

115.52 (g): The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

Policy # 430.00, page 16 H states: Offenders may be disciplined The agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith. No confined person has been disciplined for filling a grievance in bad faith. No confined person has filed a grievance alleging sexual abuse during the 12-month preceding the audit.

The inmate handbook states: If you have been assaulted or witness an assault, or if you are a victim of sexual abuse or witnessed inmate-on-inmate or staff sexual misconduct report it to any WVDCR staff, you may fill out a grievance form, write a note, request to see the nurse or counselor; or you may use the Confidential Sexual Abuse Hotline by dialing *9078 on the inmate phones. Anonymous letters can be written to the WV Fusion Center at 1900 Kanawha Boulevard, Bldg. 1, West Wing Suite W-400 Charleston, WV 25305. Attn: WVDCR. Your family can also report it by

	<p>sending an e-mail to WVDCRPREA@WV.GOV.</p> <p>Offenders may report sexual abuse or sexual harassment by using the WVDCR grievance process. These grievances will be forwarded to the Superintendent or designee for immediate action. There is no time limit on when an offender may submit a grievance regarding an allegation of sexual abuse. The WVDCR does not require an offender to use any informal grievance process when reporting sexual abuse or sexual harassment.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.52 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.53:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Confined Person’s Orientation 3. Contract West Virginia FRIS (Sexual Assault Advocacy Service) 4. PREA Brochures “End the Silence” (English and Spanish) 5. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <ol style="list-style-type: none"> 1. Random Confined Persons 2. Confined Persons who Reported Sexual Abuse (0) <p>In order to decide compliance determination, the following observations were made during on-site tour of the facility:</p> <p>Hotline dialing instructions were posted near phone accessible to confined person. Numbers and addresses, and the email address are on confined person’s tablets. Posted with PREA information was posted in all areas accessible to confined person and also posted in areas accessible to visitors.</p> <p>The following describes how the evidence above was used to draw the conclusion</p>

regarding compliance (By Provision):

115.53 (a): The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.

The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations.

Upon arrival to the facility, confined persons are issued a tablet. All avenues for reporting sexual abuse, such email addresses, mailing addresses, hotline number and instructions are found on the confined persons tablets.

WVDCR has a contract with West Virginia Foundation Rape Information Services to provide advocate services to confined persons that are victim of sexual abuse; contact information for WVFRIS is found on the tablet.

115.53 (b): The facility informs inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

115.53 (c): The agency maintains or attempts to enter into memorandum of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse.

WVDCR has a contract with West Virginia Foundation Rape Information Services to provide advocate services to confined persons that are victim of sexual abuse; contact information for WVFRIS is found on the tablet.

Policy and Materials Reviewed: West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject – Prison Rape Elimination Act Compliance (PREA), Handbook, Brochure, Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

Policy # 430.00, page 16 I states: I. The WVDCR shall maintain or attempt to enter into memorandum of understanding or other agreements with community service providers that are able to provide offenders with confidential emotional support services related to sexual abuse. The WVDCR shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

1. Information regarding the agency's reporting procedures.
2. Information related to access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations.
3. The facility shall inform offenders, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. The facility shall enable reasonable confidential communication between offenders and these organizations.
4. The offender shall sign an acknowledgement of receiving the PREA training and PREA related materials. This documentation shall be placed in the offender's record.
5. For people detained solely for civil immigration purposes, the person will receive contact information for immigrant service agencies. The facility shall enable reasonable communication between offenders and these organizations and agencies, in as confidential a manner as possible.
6. Within thirty (30) days of intake, offenders shall receive comprehensive education regarding their rights to be free from sexual abuse, sexual harassment and retaliation for reporting such incidents and regarding WVDCR policies and procedures for responding to such incidents. Offenders should sign an acknowledgement of receiving training. If the acknowledgement is electronically signed, it shall be printed and placed in the offender's record.
7. It is mandatory that offenders attend PREA training. Offenders refusing, without good cause, shall be disciplined. The Facility PREA Compliance Manager or designee can make accommodations for offenders who have been previously sexually abused or who may have other good cause to find the training too difficult in a group setting.

Policy # 430.00, page 16 I states: The WVDCR shall maintain or attempt to enter into memorandum of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse. The WVDCR shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

While on site the auditor noted limited PREA signage and audit notices. This concern was communicated immediately to facility administration. Auditor was given the explanation that copies of all signage had been uploaded on individually assigned tablets. Auditor provided clarification that for compliance to this standard signage must be clearly visible in all areas, visible to staff, confined persons and visitors.

While placing signage on tablets is acceptable it does not replace posted signs.

Prior to completion of site visit acceptable PREA signage and audit notices had been placed in all areas of facility.

	<p>Based on review the agency policy and procedures, observations and information obtained through staff, confined persons interviews, review of documentation, and follow-up documentation, the facility has demonstrated full compliance with this standard.</p>
--	--

115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.54:</p> <ol style="list-style-type: none"> 1. West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Confined Person’s Orientation 3. WVFRIS Contract 4. PREA Brochures “End the Silence” (English and Spanish) 5. Offender Orientation 6. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following observations were made during on-site tour of the facility:</p> <p>PREA reporting information were posted throughout the facility, Hotline dialing instructions were posted near phone accessible to confined person. Numbers and addresses, and the email address was posted for the PREA Compliance Office. PREA information is posted on all assigned tablets accessible to confined person and also posted in areas accessible to visitors.</p> <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Informally Interviewed Confined Persons (15)</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.54 (a): The agency has established a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p>The agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. This information is found on the confined person’s tablet posted signage and agency website.</p> <p>The agency or facility publicly distributes information on how to report inmate sexual</p>

abuse or sexual harassment on behalf of inmates. Ways to report sexual abuse can be found on the agency's website.

Policy # 430.00, page 15 A states: Offenders shall be provided multiple internal and external ways to privately report sexual misconduct, retaliation by other offenders or staff for reporting sexual abuse, sexual harassment, staff neglect or violation of responsibilities that may have contributed to such incidents. The WVDCR shall also provide at least one way for offenders to report abuse or harassment to a public or private entity or office that is not part of the WVDCR, and that is able to receive and immediately forward offender reports of sexual abuse and sexual harassment to WVDCR officials, allowing the offender to remain anonymous upon request. Offenders detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. The WVDCR shall distribute publicly through the WVDCR website the e-mail, address and information on how to report sexual abuse and sexual harassment on behalf of the offender and the WVDCR policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigations. Policy and Materials Reviewed: West Virginia Division of Corrections & Rehabilitation Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) West Virginia Division of Corrections and Rehabilitation, Central Regional Jail and Correctional Facility Pre-Audit Questionnaire.

The inmate handbook states: If you have been assaulted or witness an assault, or if you are a victim of sexual abuse or witnessed inmate-on-inmate or staff sexual misconduct report it to any WVDCR staff, you may fill out a grievance form, write a note, request to see the nurse or counselor; or you may use the Confidential

Sexual Abuse Hotline by dialing #01 on the inmate phones. Anonymous letters can be written to the WV Fusion Center at 1900 Kanawha Boulevard, Bldg. 1, West Wing, Suite W-400 Charleston, WV 25305. Attn: WVDCR. Your family can also report it by sending an e-mail to DCRPREA@WV.GOV.

A search of the West Virginia Division of Corrections and Rehabilitation confirmed a section for "Reporting Sexual Abuse" it states: If you were the victim of sexual misconduct while in custody in West Virginia, or if you know of a person in custody in West Virginia who was a victim, you may report it to the WV Division of Corrections and Rehabilitation by using the following methods:

- If you were, or are, in custody at a WV juvenile center or facility, please call 1-855-366-0015.
 - If you were, or are, in custody at a WV jail facility, you may call (304) 558-2036 and ask for the PREA Coordinator. You may also email dcrprea@wv.gov.
 - If you were, or are, in custody at a WV prison, you may call (304) 558-2036 and ask for the PREA Coordinator. You may also email dcrprea@wv.gov.
- In case of email communications, please include the following:

- Incident that occurred.

	<ul style="list-style-type: none"> • Who was the victim? • Who was the suspect? • Time and date of sexual abuse. • If requested, your anonymity will be protected. <p>Policy # 430.00, page 15 B states: All employees, contractors, volunteers and interns are mandatory reporters and shall accept verbal, written, anonymous and third-party allegations from offenders who observe, are involved in, or have any knowledge, information or suspicion of sexual abuse, harassment, or an inappropriate relationship. All reports shall be promptly documented and reported to the facility Superintendent and facility PCM. Staff may be subjected to disciplinary action if they do not report such conduct. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse.</p> <p>Policy # 430.00, page 15 F states: Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates, are permitted to assist offenders in filing reports or grievances and requests for administrative remedies relating to allegations of sexual abuse. Third parties are also permitted to file such requests on behalf of offenders. CID will discuss the allegation with the alleged victim and proceed with an investigation if the allegation occurred in a correctional setting.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.54 based upon documentation provided.</p> <p>Corrective Action:</p>
--	---

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.61:1.</p> <p>Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)</p> <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (4)</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Superintendent

3. Medical Staff
4. Mental Health Staff
5. Random Staff (16)

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.61 (a): The agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

The agency requires all staff to report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment, retaliation, or neglect or violation of responsibilities that may have contributed to an incident that occurred in a facility.

Policy # 430.00, page 15 B states: All employees, contractors, volunteers and interns are mandatory reporters and shall accept verbal, written, anonymous and third-party allegations from offenders who observe, are involved in, or have any knowledge, information or suspicion of sexual abuse, harassment, or an inappropriate relationship. All reports shall be promptly documented and reported to the facility Superintendent and facility PCM. Staff may be subjected to disciplinary action if they do not report such conduct. Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse. In response to the PAQ, staff reported the agency requires all staff to immediately report any knowledge, suspicion, or information they received regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not is part of the agency; retaliation against confined persons or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Random staff interviewed confirmed all staff knew of their requirements for reporting instances or allegations of sexual abuse, retaliation, or staff neglect. All staff were adamant they would not hesitate to report to their supervisor.

115.61 (b): Staff reporting sexual abuse or harassment to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

Policy # 430.00, page 17 A states: The facility PCM will report all allegations of sexual abuse, including anonymous allegations to the Office of PREA Compliance. Staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation or other security and management decisions.

Apart from reporting to designated supervisors or officials and designated state or

	<p>local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>The interviews with random staff confirmed they would disclose any information they knew of or heard of to their immediate supervisors and would not discuss with other staff members.</p> <p>115.61 (c): Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.</p> <p>Policy # 430.00, page 22 A states: Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical, and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State or local law. Such practitioners shall be required to inform offenders at the initiation of services of their duty to report and the limitations of confidentiality. Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior victimization that did not occur in an institutional setting, unless the offender is under the age of 18.</p> <p>Interviews with medical and mental health staff confirmed they were aware of their duty to report, and the confidentiality limitations at the beginning of services. During interview with the Superintendent, he confirmed all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports are reported and investigated.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.61 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	---

115.62	Agency protection duties
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.62:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)

	<p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p> <ol style="list-style-type: none"> 1. Superintendent 2. Agency Head 3. Random Staff (16) <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.62 (a): When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse: 0</p> <p>Policy # 430.00, page 17 B states: When facility staff learns that an offender is subject in substantial risk of sexual abuse, the facility shall assess and implement appropriate protective measures and shall take immediate action to protect the offender without unreasonable delay.</p> <p>In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse: 0</p> <p>The inter views with random staff confirmed all staff know how to act and respond immediately to the situation taking protective measures separate the confined persons and move the victim to a safe place in view of staff.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.62 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	---

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 116.63:

1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)
2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (1)

1. Agency Designee
2. Superintendent

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.63 (a): Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Superintendent of the facility notifies the Superintendent/Warden of the facility or appropriate office of the agency where sexual abuse is alleged to have occurred.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: 0

115.63 (b): Notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

Notification to the other facility must be done as soon as possible, but no later than 72 hours after receiving the allegation.

115.63 (c): The agency shall document that it has provided such notification.

These notifications are documented by the Superintendent or PREA Compliance Manager.

115.63 (d): The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: 1

Policy # 430.00, page 17 C states: Within 72 hours of receiving an allegation that an offender was sexually abused while confined in another correctional facility, the Superintendent of the facility that received the allegation shall notify in writing the head of the facility or appropriate office of where the alleged abuse occurred and shall also notify the Office of PREA Compliance. The Superintendent can contact the other facility via phone before forwarding the report in writing. The facility shall

	<p>document that it has provided such notification and ensure that the allegation is investigated in accordance with PREA standards.</p> <p>During interview, the Superintendent confirmed that all instances of previous incidents of abuse that occurred at other facilities were reported to the facility where the abuse occurred. Documentation would occur and the receiving location would initiate an investigation.</p> <p>Based on the interview, the auditor is confident the facility leadership would take appropriate action if a notification is received.</p> <p>In response to the PAQ, the facility reported one allegation of sexual abuse that occurred at another facility. Notification to the facility was made per policy.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.63 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.64:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Coordinated Response Plan 3. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <ol style="list-style-type: none"> 1. Random Staff (16) <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.64 (a): Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence,</p>

including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of allegations that an inmate was sexually abused:
1

Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: 0

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: 0

115.64 (b): If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

In response to the Pre-Audit Questionnaire:

Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: 0

Policy # 430.00, page 17 D states: Upon learning of an allegation that an offender was sexually abused, the first staff member to respond to the incident shall separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. When responding to incidences of sexual abuse, all first responders are required to follow the WVDCR coordinated response plan.

The Coordinated Response Plan, first steps details actions to be taken in the event of an incident of sexual abuse which include the following elements required in this standard provision:

- Ensure the victim is separated from the abuser.
- Secure the crime scene if applicable to restrict access to the area and to prevent handling of evidence until an internal investigator arrives.
- Instruct the alleged victim to refrain from changing clothes, drinking, eating, brushing teeth, or any other activity that could destroy any physical evidence.

	<p>- Instruct the alleged perpetrator to refrain from changing clothes, drinking, eating, brushing teeth, or any other activity that could destroy any physical evidence.</p> <p>Interviewed staff, including non-uniformed staff, explained the steps required as a first responder. They're responses were consistent with the Policy and the WVDCR Coordinated Response Plan.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.64 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: None</p>
--	--

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.65:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Coordinated Response Plan 3. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following person was interviewed, and the following interview finding was considered:</p> <p>Specialized Staff (1)</p> <p>Superintendent</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.65 (a): The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Policy # 430.00, page 17 D states: Upon learning of an allegation that an offender was sexually abused, the first staff member to respond to the incident shall separate the alleged victim and abuser; preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. When responding to incidents of sexual abuse, all first</p>

	<p>responders are required to follow the WVDCR coordinated response plan.</p> <p>The facility has a Coordinated Response Plan to ensure that during an emergency, like other emergency plans required for secure facilities, the WVDCR Checklists serves as a coordinated response plan as well. The Coordinated Response Plan identifies actions to be taken by various components of the facility in response to an allegation of sexual abuse. If there was a sexual assault allegation, the facility, will comply with WVDCR Policy and initiate actions required in incidents of sexual abuse or of sexual misconduct.</p> <p>The interview with the Facility Superintendent indicated the Coordinated Response Plan serves as a guide for each first responder, medical and mental health staff as well as all participants in the event of a sexual assault.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.65 based upon documentation provided and Interview conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.66:</p> <p>1. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire</p> <p>In order to decide compliance determination, the following person was interviewed, and the following interview finding was considered:</p> <p>Specialize Staff (1)</p> <p>Agency Head</p> <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.66 (a). In response to the PAQ, the facility reported the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit.</p>

	<p>Policy # 430.00, page 17 E states: WVDCR does not have the authority to enter into collective bargaining agreements pursuant to WV State Code.</p> <p>The Agency Head reported that Collective Bargaining, as it is known in many states does not occur in the Corrections in the state of West Virginia. Individuals may join CWA (union) that allows for grievances, but it does not allow bargaining for wage or working conditions.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.65 based upon documentation provided and Interview conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Coordinated Response Plan 3. Retaliation Form 4. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <ol style="list-style-type: none"> 1. Agency Head 2. Superintendent 3. Designated Staff Member Charged with Monitoring Retaliation 4. Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) (NA) 5. Inmates who Reported a Sexual Abuse (0) <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.67 (a): The agency has established policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff and shall designate which staff members or departments are charged with monitoring retaliation.</p> <p>The facility has designated the PREA Compliance Manager as the retaliation monitor.</p>

115.67 (b): The agency employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

The facility employs multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Policy # 430.00, page 17 F states: The WVDCR shall employ multiple protection measures, such as housing changes or transfers for offender victims or abusers, removal of alleged staff or offender abusers from contact with victims, and emotional support services for offenders or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

115.67 (c): For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The facility's retaliation monitors the treatment of inmates or staff who reported sexual abuse and of inmates who reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff.

In response to the Pre-Audit Questionnaire:

The number of times an incident of retaliation occurred in the past 12 months: 0

115.67 (d): In the case of inmates, monitoring also includes periodic status checks.

In the case of inmates, monitoring also include periodic status checks.

115.67 (f): The auditor is not required to audit the provision.

Policy # 430.00, page 18 G states: The WVDCR shall monitor the conduct and treatment of offenders or staff who reported the sexual abuse and of offenders who were reported to have suffered sexual abuse for at least 90 days following a report of sexual abuse, to see if there are changes that may suggest possible retaliation by offenders or staff, and shall act promptly to remedy any such retaliation. Items the

WVDCR should monitor include any offender disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The WVDCR shall continue such monitoring beyond 90 days if the initial monitoring indicates a

	<p>continuing need. Such monitoring shall include periodic status checks. The obligation to monitor for retaliation shall terminate if the allegation is unfounded. If any individual who cooperates with an investigation expresses a fear of retaliation, the WVDCR shall take appropriate measures to protect that individual against retaliation. The facility shall act promptly to remedy any such retaliation. Action taken to protect Staff or offenders shall be documented and reported to the Office of PREA Compliance within 24 hours of the reported incident. Any effort to hinder or impede a Staff or an offender from reporting an incident or retaliation shall result in disciplinary action. (115.67(a) (b) (c) (d) (e) (f))</p> <p>The facility has named the PREA Compliance Manager (Lieutenant) at the Central Regional Jail and Correctional Facility & Jail as the staff member who shall monitor retaliation.</p> <p>Interviews confirmed staff know that retaliation is not allowed. Staff is aware that they can be removed from their jobs. It was also stated that any known retaliation would be reported to their Compliance Manager. The same steps can occur for retaliation as could occur for sexual abuse/harassment or imminent danger with housing moves or facility transfers.</p> <p>The interviews with the agency head designee and Facility Superintendent confirmed if any individual confined person or staff, fears retaliation for cooperating with investigations, protective measures will be instituted. All allegations are monitored for retaliation and WVDCR's zero-tolerance for retaliation is a deterrent for anyone to retaliate. If retaliation occurs, the person retaliating will be disciplined.</p> <p>The auditor finds the facility in compliance with PREA Provision 115.67 (e) based upon interviews conducted and documentation provided.</p> <p>Corrective Action (None)</p>
--	--

115.68	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.68:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (2)</p>

1. Superintendent
2. Staff who Supervise Inmates in Segregated Housing
3. Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) NA

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.68 (a): Use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43.

The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.

In response to the Pre-Audit Questionnaire:

The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: 0

The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement: 0

Policy # 430.00, page 14 M states: Offenders with a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made and there is no available alternative means of separation from likely abusers. If the facility cannot conduct the assessment immediately, the facility may hold the offender in involuntary segregated housing no longer than 24 hours while completing the assessment.

Policy # 430.00, page 14 I states: The PREA screening assessment information shall be used to make decisions regarding housing, bed, work, education, and program assignments. The goal of the WVDCR is to keep offenders that are at high risk for being sexually victimized away from those at high risk of being sexually abusive. The facility shall make individualized determinations about how to ensure the safety of each offender.

Segregated housing would only be used as a last resort to keep an inmate who was at high risk of sexual victimization. The most likely action would be a housing change or transfer the inmate to another facility. The facility had no occurrences of an inmate being housed in segregated housing.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.68 based upon documentation provided and interviews conducted.

Corrective Action: (None)

115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.71:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (4)</p> <ol style="list-style-type: none"> 1. Investigator (CID) 2. Agency Head 3. Superintendent 4. PREA Compliance Manager <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.71 (a): The agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p>The facility is responsible for administrative investigations in conjunction with the CID. Should the investigation is criminal in nature; the investigation is forwarded to the State Police to conduct the investigation.</p> <p>Policy # 430.00, pages 18 - 19 A (6) states: 6. Staff having any knowledge of or reason to suspect that sexual misconduct has taken place, is subject to questioning by person(s) investigating such allegations. Failure to cooperate with the investigation, such as withholding known information, withholding evidence or giving false statements will result in disciplinary action. (115.22 (a)) (115.71 (a) (g)).</p> <p>115.71 (b): Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34. Investigative staff completes the required specialized training to conduct investigations. The facility provided proof of training via copies of NIC certificates.</p> <p>Policy # 430.00, page 9 F states: F. In addition to the general training provided to all employees pursuant to §115.31, the WVDCR shall ensure that, to the extent the WVDCR itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. Corrections Investigation Division (CID) investigative staff shall receive additional specialized training on conducting sexual abuse investigations in confinement settings.</p>

Documentation will be kept in the employee's training file and a copy will be sent to the Office of PREA Compliance. (115.34 (a) (b) (c)) (115.71 (b)) This specialized training will include but is not limited to:

1 . Interviewing sexual abuse victims.

1. Proper use of Miranda warnings and the Garrity rule.

2. Sexual abuse evidence collection in confinement settings; and.

3. The criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.

115.71 (c): Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Policy # 430.00, page 20 H states: The WVDCR shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (115.72)(115.71 (c)(f)).

115.71 (d): When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Criminal investigations are referred to the West Virginia State Police to conduct the investigation.

115.71 (e): The credibility of a victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Confined persons that are victims of sexual abuse are never subject to submit a polygraph at any time during the investigation.

115.71 (f): Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

During the investigation, if it is determined that staff actions or failures of staff actions contributed to the abuse, staff maybe disciplined. All investigations are documented in written reports and retained for five years in a secure location.

115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be

referred for prosecution.

Policy # 430.00, page 20 J states: When the quality of evidence appears to support criminal prosecution, the WVDCR shall conduct compelled interviews only after consulting with prosecutors to determine whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an offender or staff. The WVDCR shall not require an offender who alleges unwanted forced sexual abuse to submit to a polygraph examination or other truth telling device as a condition of proceeding with the investigation of such an allegation. Investigations shall not be terminated solely because the source of the allegation recants the allegation. (115.71 (c) (d) (e) (f) (h))

In response to the Pre-Audit Questionnaire:

The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit: 0

115.71 (g): Criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

During the on-site portion of the audit, the auditor observed the secure file room in booking where investigations are stored.

Policy # 430.00, page 19 C states: Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. (115.71 (g) (h))

115.71 (i): The agency retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The facility retains all written reports of sexual abuse for five years or as long as the alleged abuser is in the custody of WVDCR.

Policy # 430.00, page 19 D states: The WVDCR shall retain all written reports for as long as the alleged abuser is incarcerated or employed by the WVDCR, plus five (5) years. (115.71 (i))

115.71 (j): The departure of the alleged abuser or victim from employment or control of the facility or agency shall not provide a basis for terminating an investigation.

All allegations of sexual abuse are investigated regardless if the confined person is release from custody or a staff member's employment is terminated.

Policy # 430.00, page 21 A states: The departure of the alleged abuser or victim from the employment or control of the WVDCR shall not provide a basis for terminating an

investigation.

115.71 (k): Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Policy # 430.00, page 20 K states: At the conclusion of the investigation, the investigator will prepare an investigative report that documents a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings and all documentary evidence when feasible. The investigative findings will indicate whether the evidence supports a finding that sexual abuse has occurred (substantiated), the allegation is false (unfounded), or the evidence is inconclusive (unsubstantiated). If the case has not already been referred for criminal prosecution, the investigator will refer substantiated allegations of conduct that appears to be criminal for prosecution in the county where the assault occurred. If any State entity or Department of Justice component conducts investigations shall do so pursuant to the above requirements. (115.71 (h) (k)) (115.73 (b))

115.71 (l): When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Investigations conducted by the West Virginia State Police, informs CID of the status of the investigation.

Policy # 430.00, page 19 E states: When an outside agency investigates sexual abuse, the WVDCR shall request that the investigating agency follow the medical and mental health requirements of this policy. CID shall endeavor to remain informed about the progress of the investigation and regularly update the Office of PREA Compliance throughout the investigative progress. (115.21 (t) (g)) (115.71 (1)) (115.22 (b))

The facility uses curriculum's written for jail investigators. Such as:

- PREA – Report Writing; Prepared by D.L. Rosier, Jr., Former Deputy Director; DMAPS Investigation Unit.
- Miranda, Garrity, PREA and Such; Prepared by Michael W. Parker, ESQ.; Randolph County Prosecuting Attorney.
- Interview of Sexual Assault Victims in a Confined Setting; Prepared by D.L. Rosier, Jr., Former Deputy Director; DMAPS Investigation Unit.

All investigators have been through the above training, the required facility training and the NIC investigators curriculums. Training was verified by review of the training files.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.71 based upon documentation provided and interviews conducted.

	Corrective Action: (None)
--	---------------------------

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.72:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (1)</p> <ol style="list-style-type: none"> 1. Investigator (CID) <p>The following describes how the evidence above was used to draw the conclusion regarding compliance:</p> <p>115.72 (a): The agency imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Policy # 430.00, page 20 H states: The WVDCR shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Review of the investigation file shows that it was fact and evidence driven. The auditor saw no statements of opinions. The WVDCR Policy 430.00 requires that there shall be no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The Investigator affirmed in an interview, that the standard of evidence to substantiate an allegation of sexual abuse is “the preponderance of the evidence”.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.72 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>

115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.73:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Notifications to Confined Persons 3. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>115.73 (a): Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p>Policy # 430.00, page 20 L states: Following an investigation into an offender's allegation that he or she suffered sexual abuse, the facility PCM shall inform the offender as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the facility did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the offender. Information given to the offender shall be documented. (115.73 (a) (b))</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months: 0</p> <p>Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation: 0</p> <p>115.73 (b): If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. In response to the Pre-Audit Questionnaire:</p> <p>The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months: 0</p> <p>The agency conducts its own investigations in conjunction with the West Virginia State Police.</p> <p>115.73 (c): Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member</p>

is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

Policy # 430.00, page 20 M states: Following a substantiated or unsubstantiated allegation that a staff member has committed sexual abuse against an offender, the facility shall subsequently inform the offender whenever: (115.73(c)).

1. The staff member is no longer posted within the offender's unit.
2. The staff member is no longer employed at the facility.
3. The facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility; and/or.
4. The facility learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (115.73 (d))

115.73 (d): Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Policy # 430.00, page 21 N states: Following an offender's allegation that he or she has been sexually abused by another offender, the WVDCR shall subsequently inform the alleged victim whenever:

1. The WVDCR learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; and/or.
2. The WVDCR learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

115.73 (e): All notifications or attempted notifications shall be documented.

115.73 (f): The agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.

Policy # 430.00, page 21 O states: All notifications or attempted notifications shall be documented and sent to the offender's current WVDCR placement or address on file.

The facility's obligation to report under this policy shall terminate if the offender is released from the Division's custody. (115.73 (e) (f))

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.73 based upon documentation provided and interviews conducted.

Corrective Action: (None)

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.76:

- 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)
- 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.76 (a): Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

115.76 (b): Termination will be the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of staff from the facility who has violated agency sexual abuse or sexual harassment policies: 0

In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: 0

115.76 (c): Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse): 0

115.76 (d): All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation

	<p>prior to termination) for violating agency sexual abuse or sexual harassment policies: 0</p> <p>Policy # 430.00, page 21 A states: The staff member shall be subject to disciplinary sanctions up to and including termination for violating WVDCR sexual abuse or sexual harassment policies, termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. Disciplinary sanctions for violations of WVDCR policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of sexual abuse or harassment policies, or resignations by staff that would have been terminated if not for their resignation, will be documented and reported to law enforcement agencies, unless the act was clearly not criminal, and to any relevant licensing bodies. The departure of the alleged abuser or victim from the employment or control of the WVDCR shall not provide a basis for terminating an investigation. (115.76 (a) (b) (c) (d)) (115.71 (G))</p> <p>There have been no disciplinary sanctions or terminations of staff members, contractor or volunteers within the past 12 months. Staff and contractors found to have engaged in sexual misconduct/abuse will be banned from correctional institutions or subject to disciplinary sanctions up to and including termination and staff may be referred for criminal prosecution. Contractors and volunteers will be banned from any contact with inmates and reported to law enforcement agencies, unless the activity was not criminal. Appropriate licensing agencies will be notified.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.76 based upon documentation provided.</p> <p>Corrective Action: (None)</p>
--	---

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.77:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed,</p>

and the following interview findings were considered:

Specialized Staff (1)

Superintendent

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.77 (a): Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

In response to the Pre-Audit Questionnaire:

In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates: 0

115.77 (b): The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Policy # 430.00, page 21 B states: Any contractor, volunteer, intern or any individual who conducts business with or uses the resources of the WVDCR, who engages in, fails to report, or knowingly condones sexual abuse or sexual harassment of an offender shall be subject to appropriate disciplinary action. Retaliatory action against any individual who reports or is involved in a sexual abuse or sexual harassment investigation is strictly prohibited. Any contractor, volunteer, intern or any individual who engages in sexual abuse shall be prohibited from contact with offenders and shall be reported to law enforcement agencies and relevant licensing bodies. (115.77 ((a) (b))

An interview with the Superintendent he related; there have been no allegations made against any volunteer or contractor. If there have been; the Superintendent indicated the volunteer or contractor would be prohibited from coming into the facility while the investigation is being conducted. If the investigation determined the allegation was substantiated, local law enforcement would be notified and a recommendation would be made to refer the volunteer for prosecution. Interviewed contractor confirmed understanding zero tolerance and potential sanctions for violating WVDCR Policies.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.77 based upon documentation provided and interviews conducted.

Corrective Action: (None)

115.78	Disciplinary sanctions for inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.78:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (3)</p> <ol style="list-style-type: none"> 1. Superintendent 2. Medical Staff 3. Mental Health Staff <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.78 (a): Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: 0</p> <p>In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: 0</p> <p>115.78 (b): Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.</p> <p>115.78 (c): The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.</p> <p>115.78 (e): The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.</p> <p>115.78 (g): An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not</p>

coerced.

Policy # 430.00, page 22 C states: All sexual contact, whether voluntary or forced, between offenders is prohibited and subject to disciplinary action. Any mutual sexual contact between offenders is a rule violation but shall not constitute sexual abuse. Offenders shall be subject to disciplinary sanctions pursuant to an investigation that concluded that the offender engaged in offender-on-offender sexual abuse. Offenders may be charged with a facility rule violation even if they are also being charged within the court system. Sanctions shall be commensurate with the nature and circumstances of the abuse or harassment, the offender's disciplinary history, and the sanctions imposed for comparable offenses by other offenders with similar histories. The disciplinary process shall consider whether an offender's mental disabilities or mental illness contributed to his/her behavior when determining what type of sanction, if any, should be imposed. The facility may discipline an offender for sexual contact with staff only upon a finding that the staff member did not consent to such contact. (115.78 (a) (b) (c) (e) (g))

115.78 (d): If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

Policy # 430.00, page 22 A states: When an adult offender is found guilty of misconduct related to sexual abuse and the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offender to participate in such interventions as a condition of access to programming or other benefits. (115.78 (d))

115.78 (f): For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Policy # 430.00, page 22 C states: A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. (115.78 (f))

During interviews with the Superintendent and medical staff they indicated the policy requires that the disciplinary process considers whether an offender's mental disabilities or mental illness contributed to behavior when determining what type of sanction, if any, will be imposed. And if the facility offers therapy, counseling or other interventions to address and correct underlying reasons or motivations for the abuse, the facility is required to consider whether to offer the offending inmate to participate in such interactions as a condition of access to programming or other benefits. Policy affirms that an offender may be disciplined for sexual contact with a staff member only upon finding that the staff member did not consent to such contact.

The auditor has determined current operations and practices meet the requirements

	<p>of PREA Standard 115.78 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.81:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (3)</p> <ol style="list-style-type: none"> 1. Superintendent 2. Medical Staff 3. Mental Health Staff 4. Confined Persons who Disclosed Prior Victimization During Risk Screening (0) <p>In order to decide compliance determination, the following observations were made during my on-site tour of the facility:</p> <p>115.81 (a): If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p>115.81 (b): If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up</p>

	<p>meeting with a mental health practitioner: 0</p> <p>Policy # 430.00, page 14 J states: If the PREA screening indicates that an offender has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the offender is offered a follow-up meeting with the facility mental health practitioner within fourteen (14) days of the intake screening. (115.81 (a) (b) (c)) (115.83 (h))</p> <p>115.81 (e): Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p> <p>Policy # 430.00, page 22 A states: Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical, and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments, or as otherwise required by Federal, State or local law. Such practitioners shall be required to inform offenders at the initiation of services of their duty to report and the limitations of confidentiality. Medical and mental health practitioners shall obtain informed consent from offenders before reporting information about prior victimization that did not occur in an institutional setting unless the offender is under the age of eighteen (18). (115.61 (d) (l 15.81(e) (d))</p> <p>Interviews with medical and counseling staff who conducts the victim/aggressor assessments of incoming inmates confirmed that each screening asks inmates about prior victimization and prior abuse. They all are aware that this disclosure must result in a referral to a medical or mental health practitioner within 14 days. Inmates can refuse the referral. Interviewed inmates who reported having been victims of previous sexual abuse indicated they were offered mental health services and follow-up, all refused a follow-up with mental health.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.81 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.82:

1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)
2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (3)

1. Medical Staff
2. Mental Health Staff
3. Security First Responder

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.82 (a): Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

115.82 (d): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Policy # 430.00, page 23 B states: Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. All victims of sexual abuse shall be offered access to forensic medical examinations at an outside facility such examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. Offenders who may require SAFE/SANE exam may not refuse such exams at the facility level. The WVDCR shall document efforts to provide a SAFE or SANE, if one is not available, the examination can be performed by other qualified medical practitioners. Treatment shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The facility shall maintain a SAFE/SANE log documenting when these services were attempted or utilized. (115.82 (a) (d)), (115.83 (g)), (115.21 (c))

Medical staff at the facility does not conduct SANE exams, if a confined person is sexual assaulted he is transported to the local hospital and a SANE nurse will conduct the examination.

115.82 (b): If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

Policy # 430.00, page 23 C states: The facility will use the list of local hospitals that

	<p>employ a SANE, to determine the appropriate medical provider to transport to. Any refusal by the offender to undergo the forensic exam must be documented. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. (115.21 (c)) (115.82 (b))</p> <p>115.82 (c): Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>Policy # 430.00, page 23 E states: Victims of sexual abuse shall be offered information about timely access to emergency contraception, pregnancy tests and sexually transmitted disease testing and treatment, in accordance with professionally accepted standards and policies of care, where medically appropriate. If pregnancy results due to the sexually abusive vaginal penetration while incarcerated such victims shall be receive timely and comprehensive information about access to all lawful pregnancy related medical services. (115.82 (c)) (115.83 (d) (e) (f))</p> <p>This facility houses male and female confined persons.</p> <p>Sexual Assault Nurse Examiners are provided through the local hospitals. Previous interviews with two Sexual Assault Nurse Examiners confirmed their role in responding to a sexual assault and conducting the forensic exam. Interviews indicated the inmate would be offered testing for HIV and other Sexually Transmitted Infection and offered STI Prophylaxis. They indicated that following the forensic exam, they would recommend the STI Prophylaxis and any other medication required. Inmates are never charged for medical care cost associated with a sexual assault.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.82 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.83:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)

2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (2)

1. Medical Staff
2. Mental Health Staff
3. Confined Person who Reported Sexual Abuse (0)

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.83 (a): The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

115.83 (b): Evaluation and treatment of victims includes, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

115.83 (c): The facility provides victims with medical and mental health services consistent with the community level of care.

Policy # 430.00, pages 23 - 24 F states: WVDCR facilities shall offer medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse within any facility. Offenders will be offered follow-up medical and mental health services consistent with the community level care as well as access to outside victim advocates for emotional support services related to sexual abuse. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to placement to other facilities or release from custody. (115.83 (a) (b) (c)).

Medical and mental health services are offer on-site at the facility. Medical staff is contracted through Wexford.

115.83 (d): Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.

115.83 (e): If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

115.83 (f): Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Policy # 430.00, pages 23 E states: Victims of sexual abuse shall be offered information about timely access to emergency contraception, pregnancy tests and

sexually transmitted disease testing and treatment, in accordance with professionally accepted standards and policies of care, where medically appropriate. If pregnancy results due to the sexually abusive vaginal penetration while incarcerated such victims shall be receive timely and comprehensive information about access to all lawful pregnancy related medical services. (115.82 (c)) (115.83 (d) (e) (f))

115.83 (g): Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Policy # 430.00, pages 23 B states: Victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. All victims of sexual abuse shall be offered access to forensic medical examinations at an outside facility; such examinations shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. Offenders who may require SAFE/SANE exam may not refuse such exams at the facility level. The WVDCR shall document efforts to provide a SAFE or SANE, if one is not available, the examination can be performed by other qualified medical practitioners. Treatment shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility shall maintain a SAFE/SANE log documenting when these services were attempted or utilized. (115.82 (a) (d)), (115.83 (g)), (115.21 (c))

115.83 (h): All prisons attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Policy # 430.00, pages 24 G states: The facility shall attempt to conduct a mental health evaluation of all known offender-on-offender abusers within sixty (60) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. 115.83 (h)

This facility offers both medical and mental health follow-up for any inmate who has suffered sexual abuse at any location; including the community. Medical Services includes any medical need. Both are provided at no cost to the inmate. Health Service can provide information about continuing care in the community; however inmates state that the counselors provide information about outside agencies throughout the state when requested.

The interview with mental health staff confirmed they attempt to conduct mental health evaluations no later than 60 days after being notified of a confined person abuser.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.83 based upon documentation provided and interviews conducted.

	Corrective Action: (None)
--	---------------------------

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.86:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Central Regional Jail and Correctional Facility Pre-Audit Questionnaire <p>In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:</p> <p>Specialized Staff (4)</p> <ol style="list-style-type: none"> 1. Agency Head 2. Superintendent 3. PREA Compliance Manager 4. Incident Review Team <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.86 (a): The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents: 0</p> <p>115.86 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p>In response to the Pre-Audit Questionnaire:</p> <p>In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 0</p>

115.86 (c): The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Policy # 430.00, page 24 A states: The Office of PREA Compliance, in collaboration with the facility PCM shall conduct a Sexual Abuse Incident Review within thirty (30) days of the conclusion of every sexual abuse investigation where the allegation was substantiated, or unsubstantiated. The review team shall include upper-level facility staff, with input from line supervisors, investigators, and medical or mental health practitioners. No review shall be conducted if the allegation has been determined to be unfounded. (115.86 (a) (b) (c)).

115.86 (d): The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Policy # 430.00, page 24 B states: The review committee shall: (115.86 (d)).

1. Consider whether the allegation or investigation indicates need to change policy or practice to better detect, or respond to sexual abuse.

2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.

3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.

4. Assess the adequacy of staffing levels in that area during different shifts; and.

5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

115.86 (e): The facility implements recommendations for improvement, or shall document its reasons for not doing so.

Policy # 430.00, page 24 C states: The facility shall document the recommendations for improvement or reasons for not doing at the conclusion of the Sexual Abuse Incident Review. (115.86 (e)) The Office of PREA Compliance shall prepare a report of

	<p>its findings and ensure that any deficiencies are promptly identified and corrected. The review findings, recommendations for improvement and corrective action shall be documented.</p> <p>The Superintendent reported that historically the Incident Review Team consists of upper-level management, the PREA Compliance Manager, supervisors, investigators, counselors and medical staff. A report will be prepared of the findings for the Superintendent and PREA Compliance Office who are authorized to implement the recommendations for improvement or document the reason for not doing so. The Review Team is in compliance with policy and was confirmed during interviews and review of Incident Reviews.</p> <p>The facility had zero (0) investigations during the 12-months preceding the audit.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.86 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.87:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Annual PREA Report 2022 <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>115.87 (a): The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p>Policy # 430.00, pages 31 - 32 E states: The facility PCM shall be responsible for ensuring that accurate information is collected for every allegation of offender-on-offender sexual abuse and staff-on-offender sexual misconduct that occurs within his/her facility. Incident-based data reports shall be generated each month.</p> <p>The data collected shall include at a minimum:</p> <ol style="list-style-type: none"> 1. The total number of allegations.

2. Investigation number and the disposition.

3. The WVDCR shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

4. The WVDCR also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its offenders.

5. The incident-based data collected shall include, at a minimum, the data necessary to complete the Survey of Sexual Violence conducted by the Department of Justice.

115.87 (b): The agency aggregates the incident-based sexual abuse data at least annually.

Policy # 430.00, page 32 H states: The Director of PREA Compliance shall submit an annual report of the incident-based sexual abuse data, to include facility recommendations and corrective actions to the WVDCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the WVDCR's progress in addressing sexual abuse. The annual report shall be approved by the WVDCR Commissioner and made readily available to the public annually through the WVDCR website. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the Department of Justice. (115.87 (b) (f)) (115.88 (b) (c) (d)) (115.89 (b) (c))

115.87 (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Policy # 430.00, page 32 E (5) & F states: The incident-based data collected shall include, at a minimum, the data necessary to complete the Survey of Sexual

Violence conducted by the Department of Justice. (115.87 (c))

The WVDCR shall use the data to:

1. Identify areas of concern.

2. Determine corrective action on an ongoing basis.

3. Assess and improve the effectiveness of the agencies sexual abuse prevention, detection, and response policies, practices, and training; and.

4. Create an annual report of findings and corrective actions for each facility and WVDCR.

115.87 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual

abuse incident reviews.

Policy # 430.00, page 32 E (3) states: The WVDCR shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews; and (115.87 (d)).

115.87 (f): Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

Policy # 430.00, page 32 H states: H. The Director of PREA Compliance shall submit an annual report of the incident-based sexual abuse data, to include facility recommendations and corrective actions to the WVDCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the WVDCR's progress in addressing sexual abuse. The annual report shall be approved by the WVDCR

Commissioner and made readily available to the public annually through the WVDCR website. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the Department of Justice. (115.87 (b) (f)) (115.88 (b) (c) (d)) (115.89 (b) (c))

The agency/facility utilizes a PREA Monthly Statistical report that is provided to WVDCR. The form is extensive. It covers:

- Inmate-on-Inmate Sexual Acts (including definitions for Non-consensual Sexual Acts, Abusive Sexual Contacts and Sexual Harassment).
- Staff Sexual Misconduct (including definitions for Staff Sexual Misconduct and Staff Sexual Harassment).

Each of these individual areas is delineated by Number of Allegation, Incident Report and/or Investigation Numbers, Disposition (Substantiated, Unsubstantiated, Unfounded and Investigation ongoing). There is also a Substantiated Incident Data Questionnaire for Victim (inmate-on-inmate), an Inmate-on-Inmate Questionnaire for the Predator and a Staff-on- Inmate Questionnaire. Each of these three (3) documents must be completed for each occurrence. Annual reports are placed on the agency website. The facility provides its data to the Department of Justice as requested.

The auditor has determined current operations and practices meet the requirements of PREA Standard 115.87 based upon documentation provided and interviews conducted.

Corrective Action: (None)

Auditor Overall Determination: Meets Standard

Auditor Discussion

In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.88:

1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)
2. Annual Reports 2012 - 2022

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff: (2)

1. Agency Head
2. Facility PREA Compliance Manager

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.88 (a): The agency reviews data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.

115.88 (b): Such report includes a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.

Policy # 430.00, page 26 G states: G. All sexual abuse data shall be securely retained for at least ten (10) years after the date of the initial collection.

115.88 (d): The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

Policy # 430.00, page 26 H states: The Director of PREA Compliance shall submit an annual report of the incident-based sexual abuse data, to include facility recommendations and corrective actions to the WVDCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the WVDCR's progress in addressing sexual abuse. The annual report shall be approved by the WVDCR Commissioner and made readily available to the public annually through the WVDCR website. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the

	<p>Department of Justice.</p> <p>The Director of PREA Compliance shall submit an annual report of the incident based sexual abuse data, to include facility recommendations and corrective actions to the WVDCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the WVDCR's progress in addressing sexual abuse. The annual report shall be approved by the WVDCR Commissioner and made readily available to the public annually through the WVDCR website. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the Department of Justice.</p> <p>The WVDCR shall use the data to:</p> <ol style="list-style-type: none"> 1. Identify areas of concern. 2. Determine corrective action on an ongoing basis. 3. Assess and improve the effectiveness of the agency's sexual abuse prevention, detection, and response policies, practices, and training. 4. Create an annual report of findings and corrective actions for each facility. <p>115.88 (c): The agency's reports approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.</p> <p>Interviews with the PREA Compliance Manager and Superintendent confirmed the facility provides the required data, if any, to the WVDCR Office of PREA Compliance by reporting immediately any allegations or incidents of sexual abuse at the facility as well as monthly in the monthly PREA Report. The annual reported is headed by the Office of PREA Compliance. As noted in the policy above, the annual report is available on the Website, https://dcv.wv.gov/Pages/default.aspx.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.88 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	In order to decide compliance determination for this standard, the following policies

and other documentation were reviewed for standard 115.89:

1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA)
2. Annual Reports 2014 - 2022

In order to decide compliance determination, the following people were interviewed, and the following interview findings were considered:

Specialized Staff (2)

1. Agency Head
2. PREA Compliance Manager

The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):

115.89 (a): The agency ensures that data collected pursuant to § 115.87 are securely retained.

Date collected is securely stored in locked cabinets in the booking area behind lock doors with limited access.

Policy # 430.00, page 26 G states: G. All sexual abuse data shall be securely retained for at least ten (10) years after the date of the initial collection.

In response to the PAQ, the facility reported its agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. Investigations files are retained to ten years.

115.89 (b): The agency makes all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.

115.89 (c): Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.

Policy # 430.00, page 26 H states: The Director of PREA Compliance shall submit an annual report of the incident-based sexual abuse data, to include facility recommendations and corrective actions to the WVDCR Commissioner. The annual report shall include comparisons of the current year's data and corrective actions with those from prior years and will include an assessment of the WVDCR's progress in addressing sexual abuse. The annual report shall be approved by the WVDCR Commissioner and made readily available to the public annually through the WVDCR website at <https://dcr.wv.gov/resources/Pages/prea.aspx>. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the Department of Justice.

	<p>115.89 (d): The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p>Policy # 430.00, page 26 G states: All sexual abuse data shall be securely retained for at least ten (10) years after the date of the initial collection.</p> <p>The annual report shall be approved by the WVDCR Commissioner and made readily available to the public annually through the WVDCR website. The WVDCR may redact personal identifiers or other specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted. Upon request, the WVDCR shall provide all such data from the previous calendar year to the Department of Justice. The agency securely retains the information for ten years.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.89 based upon documentation provided and interviews conducted.</p> <p>Corrective Action: (None)</p>
--	---

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.401:</p> <ol style="list-style-type: none"> 1. Policy Directive # 430.00; Subject - Prison Rape Elimination Act Compliance (PREA) 2. Annual Reports 2012 - 2022 3. Central Regional Jail and Correctional Facility April 12, 2021 PREA Report 4. WVDCR Website https://dcr.wv.gov/resources/Pages/prea.aspx <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>Policy # 430.00, page 26 - 27 A, B and C states: Upon request for information, the Director of PREA Compliance will be responsible to respond to all external surveys, schedule audits required by the Department of Justice's National PREA Standards and comply with all PREA requirements and ensure that at least one-third of each facility type under the WVDCR's control is audited during each year of the three-year audit cycle. (115.401 (a) (b))</p> <p>A. The auditor will review and have access to all relevant information listed below:</p> <ol style="list-style-type: none"> 1. Policies, procedures, reports, internal and external audits, and accreditations for

each facility type.

2. A sampling of relevant documents and other records and information for the most recent one-year period.

3. Shall observe, all areas of the audited facilities.

4. Shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

5. Shall retain and preserve all documentation (including, e.g., video tapes and interview notes) relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.

6. Shall interview a representative sample of offenders and of staff, supervisors, and administrators.

7. Shall review a sampling of any available videotapes and other electronically available data that may be relevant to the provisions being audited.

8. Shall be permitted to conduct private interviews with offenders; and.

9. Shall attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.

115.401 (a): During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.

Central Regional Jail and Correctional Facility was last audit April 2021 with compliance in all standards. The final report dated April 12, 2021 has been posted on the agency's website at [https:// dcr.wv.gov/resources/Pages/prea.aspx](https://dcr.wv.gov/resources/Pages/prea.aspx).

115.401 (b): During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

Review of the agency website confirmed all West Virginia Department of Corrections and Rehabilitation facilities are audited within three year cycle. The auditor reviewed the last audit for Central Regional Jail and Correctional Facility.

115.401 (h): The auditor shall have access to, and shall observe, all areas of the audited facilities.

During the on-site portion of the audit, the auditor had complete access to all areas of the facility. The auditor was accompanied by facility staff and the agency's Office of PREA Compliance personnel. During the review, the auditor observed PREA Audit Notices posted throughout the facility accessible to all confined persons, visitors, volunteers, and contractors.

The auditor informally interviewed confined persons, contractors, and staff during the site tour.

PREA signage in English and Spanish was posted in all living units, medical kitchen, dining hall, recreation area, and administration. Metal signs with PREA Hotline dialing instructions were posted next to all phones accessible to confined persons. The auditor tested multiple phones to ensure they were operational. Confined persons have access to paper and writing utensils. The auditor observed confined persons with tablets. Grievance Boxes were observed in multiple areas accessible to confined persons, the agency has an administrative procedure that allows confined person to report sexual abuse and harassment. Cameras are strategically placed throughout the facility; staff stated the facility is monitored by surveillance cameras 24/7.

The auditor observed the file room located in the booking area; classification file room where confined persons records are stored, the area has limited access to program staff and administration staff has access to enter this area and review confined persons files.

115.401 (i): The auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).

The auditor reviewed documents uploaded into the Online Audit System, when additional documentation was requested, the facility provided the information expeditiously. After the on-site portion of the audit, additional documentation was received via mail and uploaded into the Supplement File in the Online Audit System. All requested documentation was provided.

The auditor reviewed confidential confined person's mental health and medical files during the site review.

115.401 (m): The auditor was permitted to conduct private interviews with inmates.

The facility provided the auditor a private area to conduct interviews with random confined persons, targeted confined persons, contractors, random staff, and specialized administrative staff. The auditor was unable to interview any volunteers during the on-site portion of the audit. All individuals interviewed were forthcoming and polite. Facility staff ensured that confined persons were readily available for interview.

115.401 (n): Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

The audit notices was posted 45 days prior to the on-site portion of the audit with the auditor contact information, providing the confined persons, visitors, volunteers, contractor, staff, and other outside interested parties to privately correspond with the auditor. The auditor received no correspondence from a confined person, staff, contractor, or other outside parties.

	<p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.401 based upon documentation provided.</p> <p>Corrective Action: (None)</p>
--	---

115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In order to decide compliance determination for this standard, the following policies and other documentation were reviewed for standard 115.403:</p> <ol style="list-style-type: none"> 1. Pre-Audit Questionnaire (PAQ) 2. https://dcr.wv.gov/resources/Pages/prea.aspx. <p>The following describes how the evidence above was used to draw the conclusion regarding compliance (By Provision):</p> <p>The Agency PREA Coordinator ensures that all PREA Reports are published on the agency's website within 90 days of the completion of the report. Reports for all facilities for all reporting periods are posted on the agency's website, https://dcr.wv.gov/resources/Pages/prea.aspx and are easily accessible to the public. The auditor reviewed the Agency's website and reviewed the previous PREA reports, as well as, annual reports that were posted on the website.</p> <p>The auditor has determined current operations and practices meet the requirements of PREA Standard 115.403 based upon documentation provided.</p> <p>Corrective Action: (None)</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a) Use of screening information		
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b) Use of screening information		
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c) Use of screening information		
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes